

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

National Rifle Association of America Political Victory Fund

ADDRESS (number and street)

11250 Waples Mill Road

☐Check if different
than previously
reported. (ACC)

Fairfax

VA

22030

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00053553

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

10

16

2008

through

11

24

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mary Rose Adkins

Signature of Treasurer

Electronically Filed by Mary Rose Adkins

Date

12

04

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		5065721.74
(b) Cash on Hand at Beginning of Reporting Period	4466319.17	
(c) Total Receipts (from Line 19)	1419579.29	8740275.66
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5885898.46	13805997.40
7. Total Disbursements (from Line 31)	4003390.02	11923699.68
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1882508.44	1882297.72
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	462290.17	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	301980.05	1087974.24
(i) Itemized (use Schedule A)		
(ii) Unitemized	1114391.80	7562856.53
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1416371.85	8650830.77
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1416371.85	8655830.77
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	2470.00
17. Other Federal Receipts (Dividends, Interest, etc.)	3207.44	81974.89
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1419579.29	8740275.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1419579.29	8740275.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	-235756.54	957162.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	-235756.54	957162.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	137714.60	807581.75
24. Independent Expenditure (use Schedule E)	3891453.07	9328898.43
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	2500.00	3508.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	2500.00	3508.00
29. Other Disbursements.....	207478.89	826548.81
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4003390.02	11923699.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4003390.02	11923699.68

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	1416371.85	8655830.77
34. Total Contribution Refunds (from Line 28(d))	2500.00	3508.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1413871.85	8652322.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	-235756.54	957162.69
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-235756.54	957162.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RUDY B HERNANDEZ

Mailing Address PO BOX 60

City

CLAYPOOL

State

AZ

Zip Code

85532-0060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27365561

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR KEN SUTTON

Mailing Address 8115 E 15TH ST

City

TULSA

State

OK

Zip Code

74112-8253

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27365584

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

GLENN F ADAMS

Mailing Address 57931 JEFFERSON AVE

City

SLIDELL

State

LA

Zip Code

70460-3717

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RIVER PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27365616

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

580.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

N C JOHNSON

Mailing Address PO BOX 278

City

SPRINGHILL

State

LA

Zip Code

71075-0278

FEC ID number of contributing
federal political committee.

C

Name of Employer
USDV FSIS MPIO MEAT INSPE-
CTION

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27365644

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

MR PATRICK D STEWART

Mailing Address PO BOX 369

City

LEESVILLE

State

LA

Zip Code

71496-0369

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

MERCHANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27365656

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR HANSEL RANSONET

Mailing Address 2008 MARSHFIELD RD

City

NEW IBERIA

State

LA

Zip Code

70563-8908

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27365683

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

CAPT KEITH C SIVERD

Mailing Address 218 LE CIRQUE

City

MADISONVILLE

State

LA

Zip Code

70447-3704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27365696

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

O W BARBER

Mailing Address 24388 MACKS CAMP AVE

City

WARSAW

State

MO

Zip Code

65355-3673

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27365700

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID DOWNES

Mailing Address 2925 ROCKY RIDGE RD

City

WILDWOOD

State

MO

Zip Code

63038-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27365714

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

395.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DOMINIC R RENDA

Mailing Address 120 PLACER MINE RD

City

FOLSOM

State

CA

Zip Code

95630-5113

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATICA CORPORATION

Occupation

SALES REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27365751

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR GARY L VANDERBILT

Mailing Address 1805 WESTWOOD DR

City

JONESBORO

State

AR

Zip Code

72401-4786

FEC ID number of contributing
federal political committee.

C

Name of Employer
GEN ELEC CO

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27365873

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

GARNET L ADAMSON

Mailing Address 6790 N SAINT LOUIS

City

BATESVILLE

State

AR

Zip Code

72501-8248

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27365911

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL DEUEL

Mailing Address PO BOX 1040

City

BROADALBIN

State

NY

Zip Code

12025-1040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27365924

Amount of Each Receipt this Period

325.00

B.

Full Name (Last, First, Middle Initial)

MR KEITH I FREDERICK

Mailing Address 11250 KENTUCKY RD

City

PAPILLION

State

NE

Zip Code

68133-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27365929

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE JEFFORDS

Mailing Address 7602 ROCKPOINT CIR

City

AUSTIN

State

TX

Zip Code

78731-1412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27365932

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 1300
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL LINK

Mailing Address 891 WALKER RD

City

BYRON

State

GA

Zip Code

31008-6240

FEC ID number of contributing
federal political committee.

C

Name of Employer
ET DUPONT DE NEMOURS

Occupation

PRODUCT DEVEL. MGR.

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27365947

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR ELSTON L LANDRUM

Mailing Address 1642 BEE BRANCH RD

City

QUITMAN

State

AR

Zip Code

72131-9650

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27365995

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR JERRY HUFFMAN

Mailing Address PO BOX 4

City

LILLIE

State

LA

Zip Code

71256-0004

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27365999

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 1300

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CLIFFORD E TERRY

Mailing Address 9079 HIGHWAY 46 N

City

SHERIDAN

State

AR

Zip Code

72150-6148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27366041

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MR GAYLE HUMPHRIES

Mailing Address 3513 W MOUNTAIN SPRINGS RD

City

CABOT

State

AR

Zip Code

72023-8076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27366048

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR DON L FRAZIER

Mailing Address PO BOX 528

City

CAMERON

State

MO

Zip Code

64429-0528

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27366060

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HUGH H ELDRIDGE

Mailing Address 6734 VENTURA BLVD

City

MILTON

State

FL

Zip Code

32583-9063

FEC ID number of contributing
federal political committee.

C

Name of Employer
U S POSTAL SERVICE

Occupation

POSTAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27366084

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR R HAMILTON

Mailing Address 18 HAMILTON RD

City

CLAYSVILLE

State

PA

Zip Code

15323-1150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED - DAIRY FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27366105

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR RUDY B HERNANDEZ

Mailing Address PO BOX 60

City

CLAYPOOL

State

AZ

Zip Code

85532-0060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27366122

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT GILL

Mailing Address 7471 ESSEX DR

City

MENTOR

State

OH

Zip Code

44060-5246

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY OF EAST CLEVELAND

Occupation

RETIRED CHIEF OF POLICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27366128

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR HARTMUT P SCHULTZ

Mailing Address PO BOX 777

City

NEW MILFORD

State

CT

Zip Code

06776-0777

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.73

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27366159

Amount of Each Receipt this Period

54.73

C.

Full Name (Last, First, Middle Initial)

MR STEN G G ELOWSON

Mailing Address 108 LEXINGTON AVE

City

MALVERNE

State

NY

Zip Code

11565-2335

FEC ID number of contributing
federal political committee.

C

Name of Employer
BKLYN UNION GAS CO

Occupation

SERVICEMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27366161

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

104.73

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROY FREE, SR

Mailing Address 6 S SENECA DR

City

TRINITY

State

AL

Zip Code

35673-5616

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27366189

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR ROY FREE, SR

Mailing Address 6 S SENECA DR

City

TRINITY

State

AL

Zip Code

35673-5616

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27366192

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR STEPHEN T T MILLER

Mailing Address 5538 LYMBAR DR

City

HOUSTON

State

TX

Zip Code

77096-5022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27366193

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN C TATE, JR

Mailing Address 419 WILSON ST

City

MALVERN

State

AR

Zip Code

72104-4525

FEC ID number of contributing
federal political committee.

C

Name of Employer
HORIZON TIMBER SERVICES

Occupation
PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27366223

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR GORDON J J DOUGLAS, JR

Mailing Address 2600 W LA HABRA BLVD APT 131

City

LA HABRA

State

CA

Zip Code

90631-4365

FEC ID number of contributing
federal political committee.

C

Name of Employer
LONG BEACH NAVAL SHIPYARD

Occupation
NAVAL ARCHIFECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27366255

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JEFFREY P SMITH

Mailing Address 10 WEST ST, APT 17A

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEHR CONSTRUCTION CORP

Occupation
PROJECT EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27366307

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 17 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

SIDNEY J BORNE

Mailing Address 6000 RANDOLPH BLVD APT 1207

City

SAN ANTONIO

State

TX

Zip Code

78233-5758

FEC ID number of contributing
federal political committee.

C

Name of Employer
PHOENIX COMM-TEL, INC.

Occupation

DETAIL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27366391

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

LAVONNE F HORMAN

Mailing Address 4034 TWIN LAKES CIR

City

CLAYTON

State

OH

Zip Code

45315-8758

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27366401

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MELVIN POTTER

Mailing Address 14557 N LUCKETT RD

City

MARANA

State

AZ

Zip Code

85653-9386

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27366409

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 18 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DELMONT SUNDERLAND

Mailing Address 11121 POND RD

City

HUNTINGDON

State

PA

Zip Code

16652-7643

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27366442

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

MR MIKE J BOHANNON

Mailing Address PO BOX 665

City

CROSSVILLE

State

TN

Zip Code

38557-0665

FEC ID number of contributing
federal political committee.

C

Name of Employer
BILBREY FUNERAL HOME

Occupation

OFFICE & MAINTENANCE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27366479

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH J KERSTEN

Mailing Address 1313 CARNATION AVE

City

METAIRIE

State

LA

Zip Code

70001-3124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27366486

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR NEIL HIGDON

Mailing Address 864 SKEESE RD

City

BIG CLIFTY

State

KY

Zip Code

42712-6846

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27366537

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR GREGORY WARD

Mailing Address 18 PANTHER LN

City

CATLETTSBURG

State

KY

Zip Code

41129-9526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27366552

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

VIVIAN RONNING

Mailing Address 330 ORCHARD ST

City

HEALDSBURG

State

CA

Zip Code

95448-4327

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27366556

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

445.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 20 / 1300

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM B SESSUMS

Mailing Address 22114 MCNABB CIR

City

SAN ANTONIO

State

TX

Zip Code

78258-7871

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27366569

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD THOMPSON

Mailing Address W10341 LUMSDEN RD

City

ELROY

State

WI

Zip Code

53929-9714

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARLISLE CO.

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27366577

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN W LILES

Mailing Address 12434 PARKRILL AVE

City

BATON ROUGE

State

LA

Zip Code

70816-6152

FEC ID number of contributing
federal political committee.

C

Name of Employer
KEMPER GROUP

Occupation
SAFETY CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27366591

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 21 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CRAIG WOODWARD

Mailing Address 400 WHITE OAK CIR

City

LAKE CHARLES

State

LA

Zip Code

70611-5638

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

REAL ESTATE INVESTMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: 27366598

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR DON L L TRENT

Mailing Address PO BOX 401387

City

HESPERIA

State

CA

Zip Code

92340-1387

FEC ID number of contributing
federal political committee.

C

Name of Employer
GATE CITY BEVERAGE DIST

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27366599

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

LES MOUNT

Mailing Address PO BOX 1076

City

WINDER

State

GA

Zip Code

30680-1076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

145.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Transaction ID: 27366605

Amount of Each Receipt this Period

-150.00

SUBTOTAL of Receipts This Page (optional)

-20.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN C TATE, JR

Mailing Address 419 WILSON ST

City

MALVERN

State

AR

Zip Code

72104-4525

FEC ID number of contributing
federal political committee.

C

Name of Employer
HORIZON TIMBER SERVICES

Occupation
PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27366642

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES B LAMBERT

Mailing Address 251 S GARFIELD RD

City

LINWOOD

State

MI

Zip Code

48634-9724

FEC ID number of contributing
federal political committee.

C

Name of Employer
WOLVERINE FIREWORKS DISPL-
AY

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27366695

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE NAVRATIL

Mailing Address 649 ROBERTS DR

City

TAMPA

State

FL

Zip Code

33619-3916

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27366710

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS PARKER

Mailing Address 600 ASTOR PLACE DR

City

NEW IBERIA

State

LA

Zip Code

70563-2234

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRO LOG INC.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27366718

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR GARRY G MORRIS

Mailing Address 216 W PUTMAN ST

City

GOLDENDALE

State

WA

Zip Code

98620-9567

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOG PROCESSORS, INC.

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27366727

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD R HOLTON

Mailing Address 186 STATE ROUTE 10

City

BRANCHLAND

State

WV

Zip Code

25506-9778

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPECIAL METALS

Occupation

LABORATORY TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27366735

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM C FRIEDENBACH

Mailing Address 1724 E OLYMPIC AVE

City

SPOKANE

State

WA

Zip Code

99207-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27366740

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM CURTIS

Mailing Address PO BOX 1028

City

VENETA

State

OR

Zip Code

97487-1028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27366746

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID VOIGHT

Mailing Address 10220 MEMORIAL DR APT 143

City

HOUSTON

State

TX

Zip Code

77024-3233

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27366753

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

730.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR R JONES

Mailing Address 10 CANADA VISTA DR

City

SANDIA PARK

State

NM

Zip Code

87047-9645

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

RETIRED LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27366764

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS FRANCES M HOPKINS

Mailing Address 601 S OKEFENOKEE DR

City

FOLKSTON

State

GA

Zip Code

31537-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27366777

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MARK KOCUREK

Mailing Address 6272 OLD DAM RD

City

GEORGETOWN

State

IL

Zip Code

61846-6082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27366798

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM H COFFIN, III

Mailing Address N96W15418 COUNTY LINE RD

City

GERMANTOWN

State

WI

Zip Code

53022-5245

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN STATE EQUIPMENT
CO

Occupation

MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27366819

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR GARY DRAKSLER

Mailing Address 225 WALTERS AVE

City

JOHNSTOWN

State

PA

Zip Code

15904-1106

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOHNSTOWN WIRE TECHNOLOGI-
ES

Occupation

STEEL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27366827

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR DOUGLAS G DRAKE

Mailing Address 3229 BELLE CT

City

ROYAL OAK

State

MI

Zip Code

48073-6844

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27366832

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DONALD G G BLANKE

Mailing Address 1490 MULLANPHY RD

City

FLORISSANT

State

MO

Zip Code

63031-4214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27366841

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE L HUSTON

Mailing Address 800 FRIAR TUCK LN

City

SALISBURY

State

MD

Zip Code

21804-9017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27366868

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MS JEAN PAUL

Mailing Address PO BOX 97

City

HAMILTON CITY

State

CA

Zip Code

95951-0097

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27366891

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ANTHONY SPANO

Mailing Address 5780 LOWELL BLVD

City

DENVER

State

CO

Zip Code

80221-1936

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOMINIC SPANO

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27366907

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR NEIL C HART

Mailing Address PO BOX 1511

City

CLOVIS

State

CA

Zip Code

93613-1511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27366914

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR NEIL C HART

Mailing Address PO BOX 1511

City

CLOVIS

State

CA

Zip Code

93613-1511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27366917

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MELVIN POTTER

Mailing Address 14557 N LUCKETT RD

City

MARANA

State

AZ

Zip Code

85653-9386

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27366923

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR R S DOCKINS

Mailing Address 600 CAROLYN CT

City

BIRMINGHAM

State

AL

Zip Code

35206-1721

FEC ID number of contributing
federal political committee.

C

Name of Employer

COCA COLA

Occupation

MACHINE OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27366930

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL E ROEHRS

Mailing Address PO BOX 181456

City

MEMPHIS

State

TN

Zip Code

38181-1456

FEC ID number of contributing
federal political committee.

C

Name of Employer
GRACELAND DODGE

Occupation

DISABLED AUTO MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27366990

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KENNETH DELANOY

Mailing Address 21007 W BEECHWOOD RD

City

ESPANOLA

State

WA

Zip Code

99022-9634

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27366997

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR KIRK HUFF

Mailing Address 2032 KIDRON RD

City

HARRISONBURG

State

LA

Zip Code

71340-5126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27367006

Amount of Each Receipt this Period

325.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES E HUTSON

Mailing Address 215 BOGUE CHITTO RD SW

City

BOGUE CHITTO

State

MS

Zip Code

39629-5155

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27367008

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 31 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RONALD W W JACKSON

Mailing Address 5679 MONROE ST APT 1117

City

SYLVANIA

State

OH

Zip Code

43560-2725

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27367037

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR EDWARD T GLOWACKI, JR

Mailing Address 149 LAKE SHORE DR

City

CHASSELL

State

MI

Zip Code

49916

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27367098

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR MATT OSTE

Mailing Address 1447 PIPER CT

City

CONCORD

State

NC

Zip Code

28025-9121

FEC ID number of contributing
federal political committee.

C

Name of Employer
AGV PRODUCTSOccupation
CSM

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: 27367183

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KENNY ROGERS

Mailing Address 4443 SWALLOWTAIL CT

City

REDDING

State

CA

Zip Code

96003-1981

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27367215

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT REAVES

Mailing Address 10831 SE SKYLINE DR

City

SANTA ANA

State

CA

Zip Code

92705-2415

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27367223

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES H WRIGHT, JR

Mailing Address 4955 SOMAM AVE

City

SAN DIEGO

State

CA

Zip Code

92110-2355

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27367277

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

730.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHNNY P MARTIN

Mailing Address 1323 CAVE SPRING RD

City

OWENS CROSS ROADS

State

AL

Zip Code

35763-9447

FEC ID number of contributing
federal political committee.

C

Name of Employer
LUNA TECH INC.

Occupation

TEST TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27367302

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN V HUSS

Mailing Address 402 SMOKY MOUNTAIN CT

City

COLUMBIA

State

MO

Zip Code

65203-8003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27367342

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MR RONALD HAWKS

Mailing Address 8609 SMOKEY HOLLOW RD

City

BALDWINSVILLE

State

NY

Zip Code

13027-8219

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALLIED CORP

Occupation

CLEANER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27367358

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE R LARSON

Mailing Address PO BOX 63

City

BALATON

State

MN

Zip Code

56115-0063

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27367368

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT J CAPLING

Mailing Address 4785 BALL RD

City

VASSAR

State

MI

Zip Code

48768-9730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27367372

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR LYLE S COUSIN

Mailing Address 1960 AVOCET DR

City

AMMON

State

ID

Zip Code

83406-6664

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

AUTO BODY REPAIR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27367383

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DORRANCE B LANCE

Mailing Address 438 ALLOWAY FRIESBURG RD

City

BRIDGETON

State

NJ

Zip Code

08302-5532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27367426

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM F DOYLE, JR

Mailing Address 145 RACETRACK RD

City

HANOVER

State

PA

Zip Code

17331-8973

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27367438

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR WILLARD M LATIMER

Mailing Address PO BOX 917

City

CHEHALIS

State

WA

Zip Code

98532-0917

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27367465

Amount of Each Receipt this Period

1025.00

SUBTOTAL of Receipts This Page (optional)

1375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JIM CONKLIN

Mailing Address 7023 CLAIRBORNE CT

City

SHAWNEE

State

KS

Zip Code

66217-9532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27367470

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR KEVIN SNYDER

Mailing Address 836 TOADTOWN RD

City

SUMMERVILLE

State

PA

Zip Code

15864-5918

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27367472

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN HERBOLSHEIMER

Mailing Address P O BOX 1282

City

MEDFORD

State

OR

Zip Code

97501-0095

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27367501

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
LES MOUNT

Mailing Address PO BOX 1076

City State Zip Code
WINDER GA 30680-1076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27367507

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
MR BRAD WATKINS

Mailing Address PO BOX 1938

City State Zip Code
VERNAL UT 84078-5938

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FORMER TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27367527

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)
MR STANLEY H KONEFAL, JR

Mailing Address 63 GARY DR

City State Zip Code
WESTFIELD MA 01085-4596

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27367544

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN L EASLEY

Mailing Address 253 DOMINICA CIR W

City

NICEVILLE

State

FL

Zip Code

32578-4069

FEC ID number of contributing
federal political committee.

C

Name of Employer

U.S. AIR FORCE

Occupation

OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27367557

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS BETTE J MOUW

Mailing Address 924 NOBLE DR NW

City

BAUDETTE

State

MN

Zip Code

56623-8828

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27367585

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR NEILL N KINDER

Mailing Address 7209 DIAMOND POINT RD NW

City

WALKER

State

MN

Zip Code

56484-2638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27367587

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR NEILL N KINDER

Mailing Address 7209 DIAMOND POINT RD NW

City

WALKER

State

MN

Zip Code

56484-2638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27367589

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH DELANOY

Mailing Address 21007 W BEECHWOOD RD

City

ESPANOLA

State

WA

Zip Code

99022-9634

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27367599

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR RODNEY RICE

Mailing Address PO BOX 744

City

BOONVILLE

State

NY

Zip Code

13309-0744

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27367627

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HARRIS PUTNAM

Mailing Address 1126 ELLIS FERRY RD

City

SHELBY

State

NC

Zip Code

28152-8721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27367649

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM W STARK, JR

Mailing Address 13431 WILDCREST DR

City

LOS ALTOS HILLS

State

CA

Zip Code

94022-6203

FEC ID number of contributing
federal political committee.

C

Name of Employer
REALTY INVSTORS ASSURANCE
CORP

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27367687

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

MR LORAN PAUL P OLSON

Mailing Address PO BOX 4677

City

PAHRUMP

State

NV

Zip Code

89041-4677

FEC ID number of contributing
federal political committee.

C

Name of Employer
SEMI-RETIRED PUBLIC SERVA-
NT

Occupation

HOUSEHOLD MOVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27367689

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BRENDAN A MOONEY

Mailing Address 17 BRANT AVE STE 6

City

CLARK

State

NJ

Zip Code

07066-1548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27367715

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR CRAWFORD W ROBERSON

Mailing Address PO BOX 1016

City

TONTO BASIN

State

AZ

Zip Code

85553-1016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27367754

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL R SEIBOLT

Mailing Address 808 8TH ST

City

FAIRBURY

State

NE

Zip Code

68352-2428

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY OF FAIRBURY

Occupation

CONTROL ROOM OPERATO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27367762

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TOM WOLFE

Mailing Address 218 UBER RD

City

MERCER

State

PA

Zip Code

16137-6354

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27367766

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MS LINDA A HOLBROOK

Mailing Address 2498 DILLARD RD W

City

BLAIRSVILLE

State

GA

Zip Code

30512-5130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27367794

Amount of Each Receipt this Period

425.00

C.

Full Name (Last, First, Middle Initial)

MR NORMAN WINGER

Mailing Address 28250 CANAL RD UNIT 204

City

ORANGE BEACH

State

AL

Zip Code

36561-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27367808

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

755.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CARL J WIMMER

Mailing Address 2715 W HIGHWAY 98

City

MARY ESTHER

State

FL

Zip Code

32569-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27367809

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JEFFREY KLIMMEK

Mailing Address PO BOX 9

City

SILVER BAY

State

MN

Zip Code

55614-0009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27367827

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR PERLEY WITHAM

Mailing Address 8 SKILLINGS RD

City

GRAY

State

ME

Zip Code

04039-9787

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27367836

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DOUGLAS B PAYNE

Mailing Address 12401 WILCOX NECK RD

City

CHARLES CITY

State

VA

Zip Code

23030-4214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27367841

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR EARL G G GUYER

Mailing Address 1440 HIGHWAY 64 E

City

VILONIA

State

AR

Zip Code

72173-9542

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.84

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27367858

Amount of Each Receipt this Period

100.84

C.

Full Name (Last, First, Middle Initial)

MR DAVID P MEADOR

Mailing Address 2720 BIG DADDYS RD

City

PIKEVILLE

State

NC

Zip Code

27863-8934

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27367880

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

500.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DANNY GIBBS

Mailing Address 9126 PLEASANT LN

City

OOLTEWAH

State

TN

Zip Code

37363-9217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27367925

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR IVAN CLARK

Mailing Address 148 E ST

City

GROTON

State

CT

Zip Code

06340-5368

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27367966

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR JASON BOLL

Mailing Address 2134 FRESE DR

City

QUINCY

State

IL

Zip Code

62305-7612

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27367977

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILMER MARTIN

Mailing Address 2781 COLEBROOK RD

City

ELIZABETHTOWN

State

PA

Zip Code

17022-9071

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27368000

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR LAWRENCE C KOENIG

Mailing Address 84 LENOX AVE

City

HICKSVILLE

State

NY

Zip Code

11801-1322

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERAL RESERVE BANK OF
NY

Occupation

SR. CUSTOMER SUPPORT SPEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: 27368012

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT C STUMP

Mailing Address 2464 N 650 E

City

WARSAW

State

IN

Zip Code

46582-8041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368069

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES P SIMMONS

Mailing Address 713 LAKE ST

City

BARABOO

State

WI

Zip Code

53913-3033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27368073

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR B B BLOOMQUIST

Mailing Address 255 FOOTHILLS SOUTH DR

City

SEDONA

State

AZ

Zip Code

86336-5029

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNITED AIR LINES INC

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27368101

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR BRIAN S MYERS

Mailing Address 771 SOLDIER HILL RD

City

ORADELL

State

NJ

Zip Code

07649-1237

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27368144

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RADON B LOVELAND

Mailing Address PO BOX 298

City

MESILLA

State

NM

Zip Code

88046-0298

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27368159

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR MARK W W METZLER

Mailing Address 50 DELBURNE DR

City

DAVIS

State

IL

Zip Code

61019-9540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368169

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MYRON SMITH, SR

Mailing Address 19170 E PALM LANE

City

BLACK CANYON CITY

State

AZ

Zip Code

85324

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368207

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LESTER M REINES

Mailing Address 2281 CURTIS MADDEN RD

City

BAKER

State

FL

Zip Code

32531-7617

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368231

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR REX E WOLFE

Mailing Address 6508 DULANE CIR

City

OKLAHOMA CITY

State

OK

Zip Code

73132-2005

FEC ID number of contributing
federal political committee.

C

Name of Employer
OKLA CITY

Occupation
FIREFIGHTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368233

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

MR FRANK LEVANTI

Mailing Address 14 GREEN HILLS RD

City

QUAKER HILL

State

CT

Zip Code

06375-1107

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368249

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ANTHONY CHIMBLO

Mailing Address 363 SUNSET DR 1

City

FORT LAUDERDALE

State

FL

Zip Code

33301-2635

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHIMBLO INDUSTRIES

Occupation

GENERAL CONTRACTOR BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368267

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR WARREN BISHOP

Mailing Address 16451 ROUTE 119 HWY NORTH

City

ROCHESTER MILLS

State

PA

Zip Code

15771-7139

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEFENDERS OF INDIANA MALL

Occupation

SECURITY GUARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27368283

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR BERNARD HILLIARD

Mailing Address PO BOX 2342

City

PAYSON

State

AZ

Zip Code

85547-2342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27368301

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)

480.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR J O BLACK

Mailing Address 33 GEORGINA ST

City

CHULA VISTA

State

CA

Zip Code

91910-6121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27368327

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR MIKE REED

Mailing Address 6676 ROBB HWY

City

BLISSFIELD

State

MI

Zip Code

49228-9662

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368331

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR LAWRENCE KLEYPAS

Mailing Address 8774 ROGUE RIVER HWY

City

GRANTS PASS

State

OR

Zip Code

97527-4354

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27368344

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 52 / 1300
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

J D MCCLANAHAN, MD

Mailing Address 3407 LEIGHS HOLLOW LN

City

FORT SMITH

State

AR

Zip Code

72903-2975

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27368381

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR LOYD DRENNAN

Mailing Address PO BOX 2204

City

COEUR D ALENE

State

ID

Zip Code

83816-2204

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368458

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN B B GALLI

Mailing Address 40 UDELL ST

City

PROVIDENCE

State

RI

Zip Code

02904-1129

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

CLERK

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368527

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

755.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 53 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STEVEN K NEWMAN

Mailing Address 13550 SE OATFIELD RD

City

MILWAUKIE

State

OR

Zip Code

97222-7031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368566

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

MR TED SCHNELL

Mailing Address 40177 271ST ST

City

PARKSTON

State

SD

Zip Code

57366-5213

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27368570

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN E MURPHY

Mailing Address 8320 LAKEWOOD DR

City

RALEIGH

State

NC

Zip Code

27613-1107

FEC ID number of contributing
federal political committee.

C

Name of Employer
W VA BIOCHEMISTRY DEPT

Occupation
LAB TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27368574

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STEPHEN GARRITY

Mailing Address 303 RIVERSIDE DR

City

CLOVERDALE

State

CA

Zip Code

95425-9588

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27368581

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR GLEN BORLAND

Mailing Address 3899 FOSTER STUB RD

City

ROPESVILLE

State

TX

Zip Code

79358-4803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27368592

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR MARK E HODGE

Mailing Address PO BOX 3149

City

BELLAIRE

State

TX

Zip Code

77402-3149

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27368665

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MARK E HODGE

Mailing Address PO BOX 3149

City

BELLAIRE

State

TX

Zip Code

77402-3149

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27368666

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN BEVAN

Mailing Address 159 EAST ST

City

PHILADELPHIA

State

PA

Zip Code

19127-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTHEASTERN PA TRANSPORT-
ATION

Occupation

1ST CLASS ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27368696

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES M THOM

Mailing Address 80 N SHARON CHAPEL RD

City

WEST LAFAYETTE

State

IN

Zip Code

47906-4500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368741

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR NEVIN Hiestand

Mailing Address 2980 HARVEST RD

City

ELIZABETHTOWN

State

PA

Zip Code

17022-9676

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27368794

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR PAUL R R WALSH

Mailing Address 1904 CANYONWOOD CT

City

VALRICO

State

FL

Zip Code

33596-5057

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27368837

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM C C DAVIS

Mailing Address 316 CACTUS RD

City

SEFFNER

State

FL

Zip Code

33584-6106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27368842

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DONEL RANDALL

Mailing Address 359 VALLEY PARK DR

City

GARLAND

State

TX

Zip Code

75043-2956

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368878

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JEFF EATHERTON

Mailing Address 1307 BELLE PL

City

FORT WORTH

State

TX

Zip Code

76107-3360

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27368900

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR HAROLD SIIMMONS

Mailing Address 306 MCCARTY LN

City

WEST MONROE

State

LA

Zip Code

71292-1931

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368928

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ED BEARDSLEY

Mailing Address 4539 PRESIDIO DR

City

LOS ANGELES

State

CA

Zip Code

90008-4823

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27368946

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR ELLIOTT P DALDOS, JR

Mailing Address 394 GRANITE SPRING RD

City

ATHOL

State

ID

Zip Code

83801-9809

FEC ID number of contributing
federal political committee.

C

Name of Employer
STRUCTURAL & FABRICATING
EQUIP

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27368949

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR JERALD THEISS

Mailing Address 6206 OLD SPRING CYPRESS RD

City

SPRING

State

TX

Zip Code

77379-3416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27368993

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 59 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD L DAVIS

Mailing Address 9967 S 2240 E

City

SANDY

State

UT

Zip Code

84092-4128

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CO

Occupation

SALES MANAGER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27369078

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS EASTERDAY

Mailing Address 19895 COUNTY ROAD 6

City

COSHOCTON

State

OH

Zip Code

43812-9149

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27369098

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR REX H PENNINGTON

Mailing Address 2309 HIWASSEE DR

City

KINGSPORT

State

TN

Zip Code

37664-3718

FEC ID number of contributing
federal political committee.

C

Name of Employer
EASTMAN CHEMICAL COMPANY

Occupation

TAX ANALYST

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

442.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27369110

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CARL MEYER

Mailing Address 3276 CONVAIR LN

City

DECATUR

State

GA

Zip Code

30032-2431

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27369189

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR ERIC SPALDING

Mailing Address 25608 KRANSBURG RIDGE CT

City

PORTER

State

TX

Zip Code

77365-4690

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27369202

Amount of Each Receipt this Period

325.00

C.

Full Name (Last, First, Middle Initial)

MR AFTON N KEMP

Mailing Address PO BOX 285

City

CHINO VALLEY

State

AZ

Zip Code

86323-0285

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27369208

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES HAHN

Mailing Address 1219 BUSHKILL CENTER RD

City

NAZARETH

State

PA

Zip Code

18064-9564

FEC ID number of contributing
federal political committee.

C

Name of Employer
KEYSTONE CEMENT

Occupation
ELECT-TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27369218

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MS BETTY J ARMBRECHT

Mailing Address 48 HARBOR RD

City

SWANSEA

State

MA

Zip Code

02777-1422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27369264

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DONALD KUBIN

Mailing Address 13345 S LAKESHORE DR

City

OLATHE

State

KS

Zip Code

66061-5006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27369295

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN W SPERRY

Mailing Address 801 OLD CORVALLIS ROAD

City

CORVALLIS

State

MT

Zip Code

59828

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27369312

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM K KEZAR

Mailing Address 11942 OTTAWA PL

City

CHINO

State

CA

Zip Code

91710-6410

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF CALIFORNIA

Occupation

CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.85

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27369351

Amount of Each Receipt this Period

35.95

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM K KEZAR

Mailing Address 11942 OTTAWA PL

City

CHINO

State

CA

Zip Code

91710-6410

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF CALIFORNIA

Occupation

CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27369354

Amount of Each Receipt this Period

35.95

SUBTOTAL of Receipts This Page (optional)

101.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM K KEZAR

Mailing Address 11942 OTTAWA PL

City

CHINO

State

CA

Zip Code

91710-6410

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF CALIFORNIA

Occupation

CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.75

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27369356

Amount of Each Receipt this Period

45.95

B.

Full Name (Last, First, Middle Initial)

MRS STACEY BROWN

Mailing Address 806 N GWYNN CT

City

BEAR

State

DE

Zip Code

19701-3012

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANALYTICAL LLC

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27369370

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS F DOWNEY

Mailing Address 3491 JO ANNE DR

City

BATON ROUGE

State

LA

Zip Code

70814-4615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27369385

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

300.95

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDWARD SPEERLY

Mailing Address 260 NODE RD

City

NODE

State

WY

Zip Code

82225-9316

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27369400

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MRS GLADYS M M GARDNER

Mailing Address 2050 W SMOKETREE DR

City

WICKENBURG

State

AZ

Zip Code

85390-1138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27369457

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS GLADYS M M GARDNER

Mailing Address 2050 W SMOKETREE DR

City

WICKENBURG

State

AZ

Zip Code

85390-1138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27369459

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHARLES W BLISS

Mailing Address 40738 POUDRE CANYON HWY

City

BELLVUE

State

CO

Zip Code

80512-9508

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27369479

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD G G RUSSELL

Mailing Address 841 KRUMHEUER DR

City

BILLINGS

State

MT

Zip Code

59101-7018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27369497

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR STEVE C FLINCHUM, SR

Mailing Address PO BOX 121

City

ANNVILLE

State

KY

Zip Code

40402-0121

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

ELECTRONICS TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27369549

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 66 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN PRUDDEN

Mailing Address 16 HARVARD TER

City

WEST ORANGE

State

NJ

Zip Code

07052-4407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27369572

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR STEVEN K NEWMAN

Mailing Address 13550 SE OATFIELD RD

City

MILWAUKIE

State

OR

Zip Code

97222-7031

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

398.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27369606

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES M PITTS

Mailing Address 610 PECAN LN

City

SANFORD

State

NC

Zip Code

27332-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27369628

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WESTON N HAMMEL

Mailing Address 10052 STATE ROUTE 503 N

City

LEWISBURG

State

OH

Zip Code

45338-9713

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

UNEMPLOYED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	8

Transaction ID: 27369652

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ZACH K FRANZGEN

Mailing Address 4044 SHOSHONE ST

City

DENVER

State

CO

Zip Code

80211-2239

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCMENAMNS PUBS & BREWERIES

Occupation

CHEF

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

502.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	8

Transaction ID: 27369666

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR RAY MONTGOMERY

Mailing Address 3199 ELM AVE

City

GRAND JUNCTION

State

CO

Zip Code

81504-6031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27369683

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FRANK S STANICH

Mailing Address PO BOX 348

City

IRON RIVER

State

MI

Zip Code

49935-0348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27369686

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR PETER MACUQA

Mailing Address 524 SHELDEN RD

City

GROSSE POINTE SHOR

State

MI

Zip Code

48236-2621

FEC ID number of contributing
federal political committee.

C

Name of Employer
MACUGA & LIDDUE, PC

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27369724

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOSEPH P P CUNNINGHAM

Mailing Address 12732 COUNTY ROAD 8 NW

City

MAPLE LAKE

State

MN

Zip Code

55358-6107

FEC ID number of contributing
federal political committee.

C

Name of Employer
EBASCO

Occupation
WELDING SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27369738

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DOUGLAS S CROUTHAMEL

Mailing Address 1139 SLOTTER RD

City

PERKASIE

State

PA

Zip Code

18944-4050

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Transaction ID: 27369745

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR GLENN J HERPOLSHEIMER

Mailing Address 3961 JUPITER AVE NE

City

GRAND RAPIDS

State

MI

Zip Code

49525-1871

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPOccupation
MACHINIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27369834

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR STEVEN L SMITH

Mailing Address 11544 DAVIS ST

City

MORENO VALLEY

State

CA

Zip Code

92557-5525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27369841

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JON W PARKER

Mailing Address 1031 S STEWART APT 1153

City

MESA

State

AZ

Zip Code

85202-8817

FEC ID number of contributing
federal political committee.

C

Name of Employer
HONEYWELL SYSTEMS

Occupation

ELECTRONICS TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27369851

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR NEAL STIDHAM

Mailing Address 15921 WAYBRIDGE GLEN LN

City

HOUSTON

State

TX

Zip Code

77095-2678

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27369858

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MS SUSAN SCHMIEGE

Mailing Address 2918 NOTTINGHAM DR W

City

SAGINAW

State

MI

Zip Code

48603-2835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27369865

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT DAVIDSON

Mailing Address HC 90 BOX 87

City

MOCCASIN

State

MT

Zip Code

59462-9707

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27369895

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR WESLEY W EUSTIS

Mailing Address 14390 N CARISSA DR

City

ORO VALLEY

State

AZ

Zip Code

85755-7139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27369902

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR JOSEPH BUCCIARELLI

Mailing Address PO BOX 756

City

NEW CANAAN

State

CT

Zip Code

06840-0756

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27369929

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID MOENCH

Mailing Address PO BOX 1029

City

OROVILLE

State

CA

Zip Code

95965-1029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27369955

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID MOENCH

Mailing Address PO BOX 1029

City

OROVILLE

State

CA

Zip Code

95965-1029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27369957

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

MR STEVEN LANE

Mailing Address 1103 W SHARPSHIRE DR

City

WAXAHACHIE

State

TX

Zip Code

75165-6315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27369963

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ARTHUR R HAMMANG, JR

Mailing Address 13408 SE LAFAYETTE HWY

City

DAYTON

State

OR

Zip Code

97114-8416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27370016

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR LEE J BRIDGES

Mailing Address 9050 E SUGAR SUMAC ST

City

TUCSON

State

AZ

Zip Code

85747-5328

FEC ID number of contributing
federal political committee.

C

Name of Employer

US AIR FORCE

Occupation

MILITARY OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27370024

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN CUNDY

Mailing Address 550 CLIFF ST

City

LANDER

State

WY

Zip Code

82520-3236

FEC ID number of contributing
federal political committee.

C

Name of Employer
US POST OFFICE

Occupation

CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27370035

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CLEMENCE B GOWER

Mailing Address 517 RESICA FALLS RD

City

EAST STROUDSBURG

State

PA

Zip Code

18302-8938

FEC ID number of contributing
federal political committee.

C

Name of Employer

EAST STROUDSBURG UNIVERSI-
TY

Occupation

LABOR FOREMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27370081

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR KEVIN WILLIAMS

Mailing Address 45863 100TH ST E

City

LANCASTER

State

CA

Zip Code

93535-8416

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

LANDLORD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27370092

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR LARRY D LOFTIS

Mailing Address PO BOX 717

City

TONASKET

State

WA

Zip Code

98855-0717

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. FOREST SERVICE

Occupation

BOTANIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27370150

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TONY LYON

Mailing Address PO BOX 27

City

PRINCETON

State

KS

Zip Code

66078-0027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27370197

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR HARVEY P KICHLINE

Mailing Address 2663 OAKHURST DR

City

CENTER VALLEY

State

PA

Zip Code

18034-9481

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTHERN LIEHIGH SCHOOL
DIST

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27370200

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR RAY EMERY

Mailing Address 8920 131ST AVE SE

City

SNOHOMISH

State

WA

Zip Code

98290-9061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27370208

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

395.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MS TERESA L L MATTHEWS

Mailing Address RR 2 BOX 680

City

AVA

State

MO

Zip Code

65608-9647

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27370232

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JOSEPH HOFFMAN

Mailing Address 4192 MOSSY COVE CT

City

NICEVILLE

State

FL

Zip Code

32578-7146

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27370237

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID E SHENAUT

Mailing Address PO BOX 396

City

SKYLAND

State

NC

Zip Code

28776-0396

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHENAUT CONSTRUCTION CO.

Occupation
GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27370256

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBIN L LARSEN

Mailing Address 8741 VAQUERO DR

City

SANDY

State

UT

Zip Code

84094-1821

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27370260

Amount of Each Receipt this Period

325.00

B.

Full Name (Last, First, Middle Initial)

MR WAYNE ALMANY

Mailing Address 564 KINCHLOE MILL RD

City

JONESBOROUGH

State

TN

Zip Code

37659-3103

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27370278

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT J NASCA

Mailing Address 3840 WEBSTER RD

City

FREDONIA

State

NY

Zip Code

14063-9724

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27370321

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOSH LANGMESSER

Mailing Address 25595 MARY ST

City

CHESTERFIELD

State

MI

Zip Code

48051-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27370353

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

TERRY GERLING

Mailing Address 19816 BUCK RIDGE RD

City

GRASS VALLEY

State

CA

Zip Code

95949-7025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27370362

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES J KERSHAW, JR

Mailing Address 5 HAISE WAY

City

MERRIMACK

State

NH

Zip Code

03054-2520

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27370363

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM F SINGER

Mailing Address 1917 SEVEN PINES DR

City

LEXINGTON

State

KY

Zip Code

40504-2244

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27370426

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM F SINGER

Mailing Address 1917 SEVEN PINES DR

City

LEXINGTON

State

KY

Zip Code

40504-2244

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27370427

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR GENE MINICK

Mailing Address 301 S BOUKNIGHT FERRY RD

City

SALUDA

State

SC

Zip Code

29138-1719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27370453

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LAWRENCE V TURK

Mailing Address 37 PINEDALE AVE

City

FARMINGVILLE

State

NY

Zip Code

11738-2625

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

Transaction ID: 27370457

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JERRY D BACON

Mailing Address 5905 ENGLEWOOD AVE

City

RAYTOWN

State

MO

Zip Code

64133-4343

FEC ID number of contributing
federal political committee.

C

Name of Employer
T & M TRANSPORTATIONOccupation
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27370460

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

MR BRUCE L WARMAN

Mailing Address 15810 WOODLANDS DRIVE CT N

City

EAST MOLINE

State

IL

Zip Code

61244-9798

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27370465

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GERALD G PAYNE, JR

Mailing Address 6940 LAKEWOOD BLVD

City

DALLAS

State

TX

Zip Code

75214-3556

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27370473

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DOUGLAS K LARSON

Mailing Address 16405 N PICATINNY WAY

City

FOUNTAIN HILLS

State

AZ

Zip Code

85268-1511

FEC ID number of contributing
federal political committee.

C

Name of Employer

OTAG ARIZONA

Occupation

FACILITY MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27370487

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR ALBERT R MINNICH

Mailing Address 1373 SUEDBURG RD

City

PINE GROVE

State

PA

Zip Code

17963-9607

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27370510

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 82 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ALAN E HEARD

Mailing Address PO BOX 104

City

ALBION

State

NY

Zip Code

14411-0104

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.P.S.

Occupation
PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27370598

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR ALAN E HEARD

Mailing Address PO BOX 104

City

ALBION

State

NY

Zip Code

14411-0104

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.P.S.

Occupation
PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27370601

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR RONALD H MYERS

Mailing Address 5238 W POTTER DR

City

GLENDALE

State

AZ

Zip Code

85308-9360

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27370666

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

445.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
FREDERICK W HESS

Mailing Address PO BOX 384

City State Zip Code
SOUTHPORT ME 04576-0384

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEXINGTON GARDENS

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27370690

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)
MR WARREN CRAWFORD

Mailing Address 7767 MADISON RD # 1

City State Zip Code
ALLIANCE NE 69301-5035

FEC ID number of contributing
federal political committee.

C

Name of Employer
WAYNE D. CRAWFORD

Occupation
FARM/RANCH HAND

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27370692

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)
MR WENDELL W SHIVERS

Mailing Address 11887 N CENTAURUS PL

City State Zip Code
ORO VALLEY AZ 85737-3456

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27370731

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN H BANACH

Mailing Address PO BOX 347

City

WILKESON

State

WA

Zip Code

98396-0347

FEC ID number of contributing
federal political committee.

C

Name of Employer
NW UTILITIES SERVICES LLC

Occupation
LINEMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27370783

Amount of Each Receipt this Period

275.00

B.

Full Name (Last, First, Middle Initial)

MR LARRY L BOWMAN

Mailing Address 2348 OLD HIGHWAY 79

City

DOVER

State

TN

Zip Code

37058-6227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27370790

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES R R CARPENTER

Mailing Address PO BOX 14533

City

ALBUQUERQUE

State

NM

Zip Code

87191-4533

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27370796

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM F SINGER

Mailing Address 1917 SEVEN PINES DR

City

LEXINGTON

State

KY

Zip Code

40504-2244

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27370870

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN D ROWLAND, JR

Mailing Address 212 WADE DR

City

MONTEVALLO

State

AL

Zip Code

35115-7924

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27370893

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT L WATSON

Mailing Address 7745 MULLIGAN AVE

City

BURBANK

State

IL

Zip Code

60459-1111

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALLIANT FOOD SERVICE

Occupation
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27370935

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT L WATSON

Mailing Address 7745 MULLIGAN AVE

City

BURBANK

State

IL

Zip Code

60459-1111

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALLIANT FOOD SERVICE

Occupation
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27370937

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

MR TERRY J PATRICK

Mailing Address N4182 CASTLE RD

City

MEDFORD

State

WI

Zip Code

54451-8592

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27370951

Amount of Each Receipt this Period

325.00

C.

Full Name (Last, First, Middle Initial)

MR JIM RYAN

Mailing Address 39 MARTHA RD

City

ORINDA

State

CA

Zip Code

94563-3558

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27370967

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

435.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD A ALLEN

Mailing Address PO BOX 8

City

NORTH BRIDGTON

State

ME

Zip Code

04057-0008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27370968

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR A B SWANSON

Mailing Address 1059 COUNTY STREET 2928

City

TUTTLE

State

OK

Zip Code

73089-3039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27371024

Amount of Each Receipt this Period

525.00

C.

Full Name (Last, First, Middle Initial)

MR DENNY SMITH

Mailing Address 1511 S BRIAR AVE

City

SPRINGFIELD

State

MO

Zip Code

65809-2618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27371027

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

855.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR L GEFERT

Mailing Address 6674 PENTZ RD SPC 41

City

PARADISE

State

CA

Zip Code

95969-2970

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27371072

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT E POLLARD

Mailing Address 11150 S 1501 RD

City

STOCKTON

State

MO

Zip Code

65785-9164

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNITED AIR LINES

Occupation

AIRLINE PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27371095

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE C CLOWES

Mailing Address 3850 GALLERIA WOODS DR APT 112

City

HOOVER

State

AL

Zip Code

35244-1090

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27371119

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 89 / 1300

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN P MULLIS

Mailing Address 3596 BORING RD

City

DECATUR

State

GA

Zip Code

30034-4409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27371181

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR DANIEL RUFFNER

Mailing Address 806 BORDEAUX AVE

City

BELLEVUE

State

NE

Zip Code

68123-3625

FEC ID number of contributing
federal political committee.

C

Name of Employer
AQUILA

Occupation

APPLIANCE SERVICE TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27371234

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES A NUNLEY

Mailing Address 31 LANEVIEW CONCORD RD

City

TRENTON

State

TN

Zip Code

38382-9498

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27371239

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ANTHONY D D VIOLINO

Mailing Address 609 WALLACE ST

City

STEILACOOM

State

WA

Zip Code

98388-2321

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27371245

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR CHRISTOPHER J WILHELM

Mailing Address 3625 SADDLE CLUB RD

City

GREENWOOD

State

IN

Zip Code

46143-9231

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27371275

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN W ANDERSON

Mailing Address 13017 THORNHILL DR

City

SAINT LOUIS

State

MO

Zip Code

63131-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27371310

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GENE MINICK

Mailing Address 301 S BOUKNIGHT FERRY RD

City

SALUDA

State

SC

Zip Code

29138-1719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27371324

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD L PORTER

Mailing Address PO BOX 279

City

VIENNA

State

OH

Zip Code

44473-0279

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27371334

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR MARVIN DODD

Mailing Address 102 LANDREAUX DR

City

WEST MONROE

State

LA

Zip Code

71291-1500

FEC ID number of contributing
federal political committee.

C

Name of Employer
L.T.C. DELTA-OUACHITA CAM-
PUS

Occupation

TECH INSTRUCTOR- REFRIDGERATO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27371350

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DANIEL R THURLOW

Mailing Address 130 JONES CORNER RD

City

CONWAY

State

MA

Zip Code

01341-9743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27371389

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE JAEGERES

Mailing Address 500 BAY RD

City

ALGOMA

State

WI

Zip Code

54201-9321

FEC ID number of contributing
federal political committee.

C

Name of Employer
BAY ROAD, INC.

Occupation

ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27371399

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR DOUGLAS M EDWARDS

Mailing Address 301 SPRING ST

City

MANSFIELD

State

OH

Zip Code

44902-1136

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27371411

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RAY ROOKS

Mailing Address PO BOX 63

City

MAURY CITY

State

TN

Zip Code

38050-0063

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27371458

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

LESLIE C ROBERTSON

Mailing Address RR 2 BOX 8A

City

TOWER HILL

State

IL

Zip Code

62571-9668

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27371496

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR M STRUEBEL

Mailing Address 36629 N 15TH AVE

City

DESERT HILLS

State

AZ

Zip Code

85086-9112

FEC ID number of contributing
federal political committee.

C

Name of Employer

HONEYWELL

Occupation

ELECTRICAL ENGR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27371521

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM E HICKMAN

Mailing Address 21117 OLD HIGHWAY 49

City

SAUCIER

State

MS

Zip Code

39574-9163

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27371525

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR JOE KOEPEL

Mailing Address 39146 PRETTY POND RD

City

ZEPHYRHILLS

State

FL

Zip Code

33540-1531

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27371533

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL BOWERS

Mailing Address 6431 NW 38TH TER

City

GAINESVILLE

State

FL

Zip Code

32653-8387

FEC ID number of contributing
federal political committee.

C

Name of Employer
COX CABLE UNIVERSITY CITY

Occupation
SYSTEM CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27371575

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM R TREVINO

Mailing Address 4674 60TH ST

City

SAN DIEGO

State

CA

Zip Code

92115-3824

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27371580

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MR HAROLD R DRICK

Mailing Address 387 DRICK RD

City

PENNSDALE

State

PA

Zip Code

17756-6413

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27371583

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT D VOSS

Mailing Address 2603 APACHE LN SW

City

LILBURN

State

GA

Zip Code

30047-5746

FEC ID number of contributing
federal political committee.

C

Name of Employer
AGL RESOURCES, INC

Occupation
CORP SECURITY DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27371675

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN FORDEN

Mailing Address 2118 MOUNT VERNON ST

City

PHILADELPHIA

State

PA

Zip Code

19130-3134

FEC ID number of contributing
federal political committee.

C

Name of Employer
PHILA WATER DEPT

Occupation
TPO I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27371759

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR B JORGENSON

Mailing Address 328 SATSOP AVE

City

SHELTON

State

WA

Zip Code

98584-2334

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27371766

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR NICHOLAS A ROSELLI

Mailing Address 216 ROOT RD

City

WESTFIELD

State

MA

Zip Code

01085-9832

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27371772

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT BRYAN

Mailing Address 23637 VIA DELFINA

City

VALENCIA

State

CA

Zip Code

91355-2630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27371794

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR STEVE FRY

Mailing Address 28407 E ORIENT CEMETERY RD

City

HARRISONVILLE

State

MO

Zip Code

64701-3161

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27371835

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR DAVE R TUOHY

Mailing Address 190 ROUND HILL RD

City

CHESHIRE

State

CT

Zip Code

06410-1639

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHEVRON TEXACO

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27371852

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DONALD L LEONARD

Mailing Address 2929 KRISTEN DR W

City

INDIANAPOLIS

State

IN

Zip Code

46218-3260

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27371883

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN E FITTS, JR

Mailing Address 123 JACQUES HAVEN RD

City

GASTON

State

SC

Zip Code

29053-8910

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONCEPT UNLIMITED INCOccupation
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27371892

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT K HONEYMAN

Mailing Address 2735 MANN RD

City

LEBANON

State

TN

Zip Code

37087-0934

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

Transaction ID: 27371909

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM J J DURR

Mailing Address 752 GOLDEN HILL RD

City

CORNWALLVILLE

State

NY

Zip Code

12418-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27371911

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR R S MUNSON, JR

Mailing Address 206 QUANOPAUG TRL

City

WOODBURY

State

CT

Zip Code

06798-2100

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27371919

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS M M PHILIPPIDES

Mailing Address 112 BRANCH BROOK RD PH

City

WILTON

State

CT

Zip Code

06897-1801

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27371923

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR VINCENT FRELICH

Mailing Address 14325 HIGHWAY 23

City

BELLE CHASSE

State

LA

Zip Code

70037-4019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	8

Transaction ID: 27371955

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS DIANE L BERKOWITZ

Mailing Address 4240 SW PEAK DR

City

POLO

State

MO

Zip Code

64671-8737

FEC ID number of contributing
federal political committee.

C

Name of Employer

CERNER CORP.

Occupation

MEDICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27371982

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

MS DIANE L BERKOWITZ

Mailing Address 4240 SW PEAK DR

City

POLO

State

MO

Zip Code

64671-8737

FEC ID number of contributing
federal political committee.

C

Name of Employer

CERNER CORP.

Occupation

MEDICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27371984

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JON KITCHEL

Mailing Address PO BOX 28036

City

SCOTTSDALE

State

AZ

Zip Code

85255-0150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27372002

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR STEPHEN M AMORATIS, JR

Mailing Address 2844 NORMANDY DR

City

PHILADELPHIA

State

PA

Zip Code

19154-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27372055

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES H FOX

Mailing Address PO BOX 385

City

MILTON

State

LA

Zip Code

70558-0385

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	8

Transaction ID: 27372100

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KENNETH L SHULAR

Mailing Address 6960 DOVEFIELD LN

City

MEMPHIS

State

TN

Zip Code

38135-3015

FEC ID number of contributing
federal political committee.

C

Name of Employer
AT&T

Occupation

PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27372125

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN A WISE

Mailing Address 7824 ALTAVAN AVE

City

LOS ANGELES

State

CA

Zip Code

90045-2520

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27372146

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

MR FRANK E LAMBRECHT

Mailing Address 634 NE 7TH AVE

City

BOYNTON BEACH

State

FL

Zip Code

33435-3907

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27372158

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE ACKERMAN

Mailing Address 248 LANES POND RD

City

HOWELL

State

NJ

Zip Code

07731-8652

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27372160

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR FRED E WERNER

Mailing Address 632 CHOUTEAU AVE

City

MITCHELL

State

IL

Zip Code

62040-2713

FEC ID number of contributing
federal political committee.

C

Name of Employer
BI STATE DEVELOPMENT AGEN-
CY

Occupation
MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27372165

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR MALCOLM O PORTICE

Mailing Address 350 E JUDDVILLE RD

City

OWOSSO

State

MI

Zip Code

48867-9468

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27372215

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR RUTH A GREENFIELD

Mailing Address 1 HASTINGS SQ

City

DURHAM

State

NC

Zip Code

27707-3643

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27372234

Amount of Each Receipt this Period

275.00

B.

Full Name (Last, First, Middle Initial)

MR EUGENE V MCKIM, JR

Mailing Address PO BOX 3197

City

LAS CRUCES

State

NM

Zip Code

88003-3197

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27372235

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR L JOHNSON

Mailing Address 13207 HOLMES ST

City

FORT WAYNE

State

IN

Zip Code

46816-9708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27372310

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)

595.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS M TORGERSON

Mailing Address 1938 156TH LN NW

City

ANDOVER

State

MN

Zip Code

55304-4668

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27372368

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS D RANCK

Mailing Address 215 DOVE AVE

City

SEBRING

State

FL

Zip Code

33872-3507

FEC ID number of contributing
federal political committee.

C

Name of Employer

STATE OF MD

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27372380

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR COLIN HAASE

Mailing Address 905 LAWN CT

City

WESTERN SPRINGS

State

IL

Zip Code

60558-2222

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOLLAND & SON

Occupation

CONSULTANT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

648.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27372432

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES D D SHIFFLETT

Mailing Address 2271 BELDOR RD

City

ELKTON

State

VA

Zip Code

22827-4138

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27372437

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

T A HORST

Mailing Address 3750 SWANSEA DR

City

MOBILE

State

AL

Zip Code

36608-1706

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27372465

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR LARRY ALLEN

Mailing Address 204 HAWTHORNE DR

City

NICHOLASVILLE

State

KY

Zip Code

40356-8909

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27372497

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HERBERT A A HEIDMANN

Mailing Address 12546 CLIFTON BLVD

City

LAKEWOOD

State

OH

Zip Code

44107-1526

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETURED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27372519

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM ADAMS

Mailing Address 17603 INDIGO HILLS DR

City

MAGNOLIA

State

TX

Zip Code

77355-2238

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27372521

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR JERRY M GAMBRELL

Mailing Address 1001 COUNTRY CRK

City

BELTON

State

SC

Zip Code

29627-8437

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27372536

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHARLES H FOX

Mailing Address PO BOX 385

City

MILTON

State

LA

Zip Code

70558-0385

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

359.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27372566

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH KINSEY

Mailing Address PO BOX 38

City

KINZERS

State

PA

Zip Code

17535-0038

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCHOOL DISTRICT

Occupation
JANITOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27372607

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR GERARD N N ROSSANO

Mailing Address 798 COUNTY ROAD 350

City

HOLLYWOOD

State

AL

Zip Code

35752-6731

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27372646

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL K STOUT

Mailing Address 844 VOYAGER ST

City

HENDERSON

State

NV

Zip Code

89002-9684

FEC ID number of contributing
federal political committee.

C

Name of Employer
US AIR FORCE

Occupation

VECHICLE MAINT SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27372693

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR STEVE ANDERSON

Mailing Address 14100 HERITAGE LN

City

ARLINGTON

State

OR

Zip Code

97812-6503

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1683.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27372709

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID A MOORE

Mailing Address PO BOX 863

City

MEDINA

State

OH

Zip Code

44258-0863

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27372718

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ARNOLD LUETH

Mailing Address 692 WALES RIDGE RD # R

City

WALES

State

MI

Zip Code

48027-3404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27372735

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR BOBBY J SHOUSE

Mailing Address 1026 PIONEER RD

City

SEARCY

State

AR

Zip Code

72143-7209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27372739

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD E HOUK

Mailing Address 678 BROOKDALE DR

City

WEST JEFFERSON

State

OH

Zip Code

43162-1004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27372768

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

LEE A BEAMAN

Mailing Address 1525 BROADWAY

City

NASHVILLE

State

TN

Zip Code

37203-3121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	8

Transaction ID: 27372781

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

MR BOB BRILEY

Mailing Address 9934 KARMONT AVE

City

SOUTH GATE

State

CA

Zip Code

90280-5415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27372791

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

MR CLIVE H SOLLITT

Mailing Address PO BOX 887

City

WOODINVILLE

State

WA

Zip Code

98072-0887

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMMERCIAL INDUSTRIES CO.

Occupation

PROJ MANAGER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	0	/	2	0	0	8

Transaction ID: 27372806

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

5155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BRIAN ZWINGMAN

Mailing Address 87203 495TH AVE

City

ONEILL

State

NE

Zip Code

68763-5307

FEC ID number of contributing
federal political committee.

C

Name of Employer
AGRICULTURAL SERVICES, INC

Occupation
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27372832

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD W DAVIES

Mailing Address PO BOX 165

City

HARBERT

State

MI

Zip Code

49115-0165

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27372840

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL FINLEY

Mailing Address PO BOX 395

City

CHESTER

State

MD

Zip Code

21619-0395

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27372852

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FREDRIC C GNADT

Mailing Address 4150 CRESTFIELD AVE

City

HOLIDAY

State

FL

Zip Code

34691-1601

FEC ID number of contributing
federal political committee.

C

Name of Employer

PASCO COUNTY SHERIFFS OFF-
ICE

Occupation

CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27372895

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD ENGLISH

Mailing Address PO BOX 2159

City

PAGOSA SPRINGS

State

CO

Zip Code

81147-2159

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27372975

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR KIM A KOEHLER

Mailing Address 3094 CALAVO DR

City

SPRING VALLEY

State

CA

Zip Code

91978-1138

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEPTUNE SCIENCES

Occupation

SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27373062

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 114 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JERRY RAY

Mailing Address 4919 JASON ST

City

HOUSTON

State

TX

Zip Code

77096-2717

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27373108

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR JOEL JUVETTE

Mailing Address 15826 DREXEL RUN

City

SAN ANTONIO

State

TX

Zip Code

78247-5807

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27373141

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MR MANUEL F OLIVEIRA

Mailing Address 31255 SULLIVAN RD

City

GUSTINE

State

CA

Zip Code

95322-9524

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27373142

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 115 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD BOPP

Mailing Address 874 SPARTA CT

City

VERNON HILLS

State

IL

Zip Code

60061-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer
W.W. GRANGER

Occupation

SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27373151

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR EDWARD W RAMSEY

Mailing Address 10932 SHERIDAN AVE S

City

MINNEAPOLIS

State

MN

Zip Code

55431-4022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27373172

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR RALPH WILLIAMS

Mailing Address 1348 LIVE OAK RDG

City

BANDERA

State

TX

Zip Code

78003-5867

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27373187

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ERIC W LAWRENCE

Mailing Address 944 S MAGNOLIA AVE

City

TUCSON

State

AZ

Zip Code

85711-5021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27373284

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MR MANUEL DUNCAN

Mailing Address 112 CROOKED BYU

City

SAINT JOSEPH

State

LA

Zip Code

71366-5123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27373286

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR GERALD H BUSS

Mailing Address 5530 MARTIN RD

City

MARION

State

NY

Zip Code

14505-9532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27373298

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT MCSORLEY

Mailing Address 2411 PIERPONT BLVD

City

VENTURA

State

CA

Zip Code

93001-4068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27373346

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL MURPHY

Mailing Address 12 VALLEY VIEW CIR

City

WARWICK

State

NY

Zip Code

10990-2719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27373348

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MRS HANNAH CHAMBERS

Mailing Address 4905 SARDIS RD

City

BOAZ

State

AL

Zip Code

35956-4513

FEC ID number of contributing
federal political committee.

C

Name of Employer
MOUNT BERRY COLLEGE

Occupation

DEAN'S SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27373364

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

415.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDWARD P HEARTY

Mailing Address PO BOX 47

City

MAHWAH

State

NJ

Zip Code

07430-0047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27373378

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES W W FLETCHER

Mailing Address 1231 WOODLAND DR

City

NEW JOHNSONVILLE

State

TN

Zip Code

37134-9791

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENN VALLEY AUTHORITY

Occupation

ASST UNIT OPERATOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27373392

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES FRADSHAM

Mailing Address 1605 PAISLEY AVE

City

FAYETTEVILLE

State

NC

Zip Code

28304-2027

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27373448

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

W I I VAN DER POEL

Mailing Address 510 DICKINSON ST

City

MISSOULA

State

MT

Zip Code

59802-3118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27373454

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR BRUCE E COOPERMAN

Mailing Address 1682 RICO PL

City

PALOS VERDES ESTAT

State

CA

Zip Code

90274-1924

FEC ID number of contributing
federal political committee.

C

Name of Employer

WASSER COOPERMAN & CANTER

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27373483

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR DONALD G BRAUNER

Mailing Address 9260 E SPEEDWAY BLVD

City

TUCSON

State

AZ

Zip Code

85710-1846

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27373495

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

KELLY GUNTER

Mailing Address 116 BELMEADE CIR

City

JOHNSON CITY

State

TN

Zip Code

37601-3935

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27373516

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR EDWARD G BONIBERGER

Mailing Address 1346 CHICAGO AVE

City

BAY SHORE

State

NY

Zip Code

11706-4601

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27373553

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR PATRICK BARNES

Mailing Address 16901 EASTSHORE RD

City

REDDING

State

CA

Zip Code

96003-1060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27373557

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TIMOTHY G MISSILDINE

Mailing Address 312 KILLOUGH CIR

City

BIRMINGHAM

State

AL

Zip Code

35215-6908

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN CAST IRON PIPE
CO.

Occupation

PATTERN MAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27373583

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM S MITCHELL

Mailing Address 4965 ROCKS RD

City

PYLESVILLE

State

MD

Zip Code

21132-1804

FEC ID number of contributing
federal political committee.

C

Name of Employer
EDGEWOOD CHEMICAL

Occupation

MECHANICAL ENGINEERING TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27373605

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR BRUCE A A GRAY

Mailing Address 40 MEDITERRANEAN DR APT 34

City

WEYMOUTH

State

MA

Zip Code

02188-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer
A O WILSON STRUCTURAL

Occupation

WELDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27373646

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MARK L LOCKWOOD

Mailing Address 11603 WENSLEDALE CIR

City

SAN ANTONIO

State

TX

Zip Code

78251-3108

FEC ID number of contributing
federal political committee.

C

Name of Employer
US AIR FORCE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: 27373694

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR GARY L JOHNSON

Mailing Address 101 W MARIPOSA DR

City

REDLANDS

State

CA

Zip Code

92373-7231

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27373709

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR STEPHEN Y Y HALL

Mailing Address 10504 RED MAPLE LN

City

RICHMOND

State

VA

Zip Code

23238-4177

FEC ID number of contributing
federal political committee.

C

Name of Employer
A ARUNDEL CO BOARD OF ED

Occupation
PSYCHOMETRIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27373730

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHAD TWIBEY

Mailing Address 598 E RED ROCK WAY

City

MORGAN

State

UT

Zip Code

84050-9895

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27373758

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT WOODHAM

Mailing Address 25101 189TH ST

City

BETTENDORF

State

IA

Zip Code

52722-7344

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27373772

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES A HOOKER

Mailing Address 7258 N 750 W

City

ROANN

State

IN

Zip Code

46974-9453

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27373822

Amount of Each Receipt this Period

47.00

SUBTOTAL of Receipts This Page (optional)

417.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES A HOOKER

Mailing Address 7258 N 750 W

City

ROANN

State

IN

Zip Code

46974-9453

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27373824

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID MORSTAIN

Mailing Address 4832 OVERMAN AVE

City

VIRGINIA BEACH

State

VA

Zip Code

23455-5827

FEC ID number of contributing
federal political committee.

C

Name of Employer
ATLANTIC LIFT SYSTEMS, INC

Occupation
FORKLIFT MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27373866

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR JEREMY WAHL

Mailing Address 32499 200TH AVE

City

GREENBUSH

State

MN

Zip Code

56726-9353

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27373871

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CECIL TYLER

Mailing Address PO BOX 289

City

MOUNTAIN CITY

State

GA

Zip Code

30562-0289

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27373890

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR HAROLD HOLT

Mailing Address 400 SARAH ELIZABETH WAY

City

TAYLORSVILLE

State

KY

Zip Code

40071-8780

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27373915

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL VARGA

Mailing Address 2472 N SEYMOUR RD

City

FLUSHING

State

MI

Zip Code

48433-9741

FEC ID number of contributing
federal political committee.

C

Name of Employer
GM POWERTRAIN

Occupation

ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.59

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27373923

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PATRICK J KLEIN

Mailing Address 1156 E FRENCH RD

City

SAINT JOHNS

State

MI

Zip Code

48879-9407

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS

Occupation

AUTOWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27373951

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR CLARENCE STONE

Mailing Address 899 MOUNT CARMEL CHU RD

City

REIDSVILLE

State

NC

Zip Code

27320-8274

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27373956

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR EDWARD H SPIEGELBERG

Mailing Address 9219 S 54TH ST

City

FRANKLIN

State

WI

Zip Code

53132-8686

FEC ID number of contributing
federal political committee.

C

Name of Employer
DENTAL ASSOCIATES, LTD

Occupation

DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27373966

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS L MCCARTY

Mailing Address 1707 WASHINGTON AVE

City

PARKERSBURG

State

WV

Zip Code

26101-3517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27373985

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID WINTER

Mailing Address 705 E COOVER ST

City

MECHANICSBURG

State

PA

Zip Code

17055-3414

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27373999

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR GREG MEALHOUSE

Mailing Address 13663 MANNING TRL N

City

STILLWATER

State

MN

Zip Code

55082-8425

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27374026

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT KNUDSEN

Mailing Address 13130 S BAKER AVE

City

ONTARIO

State

CA

Zip Code

91761-9407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27374135

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR BOB FITZPATRICK

Mailing Address 22233 WEISKE LN

City

CUSTER PARK

State

IL

Zip Code

60481-9194

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27374161

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR ALAN D CORBIN

Mailing Address 700 PARADISE COVE DR

City

LAMPE

State

MO

Zip Code

65681-6381

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27374174

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

455.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CARL WILSON

Mailing Address HC 36 BOX 37

City

EVERGREEN

State

AL

Zip Code

36401-9003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27374213

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE M FERRELL

Mailing Address 302 LOCKSLEY CIR

City

CHARLESTON

State

WV

Zip Code

25314-2428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27374228

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MARION J MITCHELL

Mailing Address 20 HERON DR

City

AMELIA

State

OH

Zip Code

45102-1776

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27374247

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CARL R HANKEL

Mailing Address 1100 W CHESTER PIKE APT E5

City

WEST CHESTER

State

PA

Zip Code

19382-5030

FEC ID number of contributing
federal political committee.

C

Name of Employer
GEO INC.

Occupation
CRNP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27374251

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MARTY VITALE

Mailing Address 467 UPPER ROCKY RD

City

SAGLE

State

ID

Zip Code

83860-9074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27374303

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

R SMITHERMAN

Mailing Address 2999 ANDERSON LN

City

TWIN FALLS

State

ID

Zip Code

83301-0349

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27374316

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DON WERNER

Mailing Address RR 3 BOX 173

City

GUYMON

State

OK

Zip Code

73942-9526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27374321

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR MIKE J ORRADRE

Mailing Address 67100 SARGENTS RD

City

SAN ARDO

State

CA

Zip Code

93450-8901

FEC ID number of contributing
federal political committee.

C

Name of Employer
SARGENT CATTLE COMPANY,
LLC

Occupation
RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27374327

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JEFF ADAMS

Mailing Address PO BOX 9754

City

BOISE

State

ID

Zip Code

83707-4754

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27374336

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT KLOPMEYER

Mailing Address 127 W CHURCH ST

City

MASCOUTAH

State

IL

Zip Code

62258-2006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27374488

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM E ADAMS

Mailing Address 247 GAGE RD

City

KLAMATH FALLS

State

OR

Zip Code

97601-1411

FEC ID number of contributing
federal political committee.

C

Name of Employer
ONE STOP AUTO PARTS

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27374523

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOSEPH CARILLO

Mailing Address 4818 43RD ST APT 3D

City

FLUSHING

State

NY

Zip Code

11377-6811

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27374575

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOSEPH CARILLO

Mailing Address 4818 43RD ST APT 3D

City

FLUSHING

State

NY

Zip Code

11377-6811

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27374578

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR G H KRAUSS, ESQ

Mailing Address 999 GILLEN DR

City

BINGHAMTON

State

NY

Zip Code

13903-5922

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27374634

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR J J BERCHENY

Mailing Address 5263 N CUSTER RD

City

MONROE

State

MI

Zip Code

48162-9648

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27374727

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FRANK BYRNE

Mailing Address 3301 RICHMOND ST

City

PHILADELPHIA

State

PA

Zip Code

19134-6005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27374741

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR PATRICK J WILLIAMS

Mailing Address 2619 5TH AVE APT 201

City

SEATTLE

State

WA

Zip Code

98121-1501

FEC ID number of contributing
federal political committee.

C

Name of Employer

REPROGRAPHICS NORTHWEST

Occupation

COPY MACHINE OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27374746

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR JOSEPH CHARBONEAU

Mailing Address 91 HUNTINGTON WOODS

City

HUNTINGTON

State

VT

Zip Code

05462-9741

FEC ID number of contributing
federal political committee.

C

Name of Employer

LANE PRESS

Occupation

PRESS MAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27374758

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID W W OCONNOR

Mailing Address 768 RIDGE DR

City

MANTUA

State

NJ

Zip Code

08051-1452

FEC ID number of contributing
federal political committee.

C

Name of Employer
L.U. 322

Occupation

PLUMBER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27374793

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR LEWIS RAY

Mailing Address 8657 COUNTY ROAD 1701

City

HOMINY

State

OK

Zip Code

74035-6610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27374804

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR KARL O O LEE

Mailing Address 1919 12TH AVE SE

City

ABERDEEN

State

SD

Zip Code

57401-7320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27374888

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MIKE W CALLAWAY

Mailing Address 126 E COMMERCIAL ST

City

HILLSBORO

State

IA

Zip Code

52630-9300

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAIRWEATHER E & P

Occupation
LEGISTICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 8

Transaction ID: 27374917

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE AMYX

Mailing Address HC 3 BOX 101

City

GAINESVILLE

State

MO

Zip Code

65655-9504

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27374939

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE AMYX

Mailing Address HC 3 BOX 101

City

GAINESVILLE

State

MO

Zip Code

65655-9504

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27374941

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PARKE E TUCKER

Mailing Address 1070 CALDWELL AVE

City

VALLEJO

State

CA

Zip Code

94591-5502

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNEMPLOYED

Occupation

BACKHOE OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27374950

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR NICHOLAS BARBIERI

Mailing Address 5802 BELLANCA DR

City

ELKRIDGE

State

MD

Zip Code

21075-5901

FEC ID number of contributing
federal political committee.

C

Name of Employer
SWALES AEROSPACE

Occupation

MECHANICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27374972

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS CAROLYN CANESTRINI

Mailing Address 2312 WESTVIEW AVE

City

ROCK SPRINGS

State

WY

Zip Code

82901-6753

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27374978

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RUSSELL O WELLER

Mailing Address 1303 S HENDERSON ST

City

SALEM

State

MO

Zip Code

65560-2521

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27374980

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN B GAMBLE

Mailing Address 439 N MAIN ST

City

NEW MARTINSVILLE

State

WV

Zip Code

26155-1328

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27374984

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD VERMILYEA

Mailing Address 9806 EARLY SPRING DR

City

HOUSTON

State

TX

Zip Code

77064-4108

FEC ID number of contributing
federal political committee.

C

Name of Employer
BROWN & ROOT INC.

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27375016

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOE H HUNT

Mailing Address PMB 266 1611 S UTICA AVENUE

City

TULSA

State

OK

Zip Code

74104-4909

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

INSPECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27375025

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR ANDREW COLBURN

Mailing Address PO BOX 31

City

WILLIMANTIC

State

CT

Zip Code

06226-0031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27375027

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM J J WIBLISHAUSER

Mailing Address 4025 AVERY PLACE

City

GASTONIA

State

NC

Zip Code

28056-2206

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27375116

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

1075.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS E E CAPLIS

Mailing Address 16791 WINTERS RD

City

GRASS LAKE

State

MI

Zip Code

49240-9143

FEC ID number of contributing
federal political committee.

C

Name of Employer
VISTEON CORP

Occupation

QUALITY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27375126

Amount of Each Receipt this Period

135.00

B.

Full Name (Last, First, Middle Initial)

J D GILLENWATERS

Mailing Address 882 BRYANT RD

City

CHESTNUTRIDGE

State

MO

Zip Code

65630-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27375128

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR MORRIS B MEHRER

Mailing Address 18622 SE 122ND ST

City

ISSAQUAH

State

WA

Zip Code

98027-6405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27375137

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MORRIS B MEHRER

Mailing Address 18622 SE 122ND ST

City

ISSAQUAH

State

WA

Zip Code

98027-6405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27375138

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR MARC RUSSO

Mailing Address 25 PLAZA ST W APT 1K

City

BROOKLYN

State

NY

Zip Code

11217-3944

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27375144

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL B PROPST

Mailing Address 28 LAUREL WOOD RD

City

NEWPORT NEWS

State

VA

Zip Code

23602-6111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27375153

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR NILES WHEELER

Mailing Address 342 KILLEARN RD

City

MILLBROOK

State

NY

Zip Code

12545-6219

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

OWNER RETAIL SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27375187

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN A MOSINIAK

Mailing Address 5917 26TH AVE S

City

MINNEAPOLIS

State

MN

Zip Code

55417-2724

FEC ID number of contributing
federal political committee.

C

Name of Employer
ISD 622

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27375198

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL HIRES

Mailing Address 7 WESTGATE CIR

City

MALVERN

State

PA

Zip Code

19355-1629

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE SHAW GROUP

Occupation

SENIOR MECHANICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27375210

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BRUCE VANLINDA

Mailing Address 3787 BOUTWELL RD

City

LAKE WORTH

State

FL

Zip Code

33461-3803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27375225

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR CARLTON L BOSWELL

Mailing Address 555 WATT ST

City

PITTSBURGH

State

PA

Zip Code

15219-4931

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27375241

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR RAYMOND STJACQUES

Mailing Address 7 CENTRAL SHAFT RD

City

FLORIDA

State

MA

Zip Code

01247-9423

FEC ID number of contributing
federal political committee.

C

Name of Employer
LENCO IND.

Occupation

C N C PLASMA OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27375251

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PARKE HOSKINS

Mailing Address PO BOX 154

City

WOLSEY

State

SD

Zip Code

57384-0154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27375261

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR ROGER L EDDY, JR

Mailing Address 4040 BLOOD RD

City

COWLESVILLE

State

NY

Zip Code

14037-9633

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROSWELL PARK CANCER INSTI-
TUTE

Occupation

RESEARCH SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27375295

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES ALBRECHT

Mailing Address R563 E TOWNLINE RD

City

ATHENS

State

WI

Zip Code

54411-9215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27375329

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHALMER D D WELLS

Mailing Address 2075 E 600 S

City

WOLCOTTVILLE

State

IN

Zip Code

46795-9016

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORP

Occupation

MILLWRIGHT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27375332

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR PETER P KARABASHIAN

Mailing Address 4 N PORTLAND AVE

City

VENTNOR CITY

State

NJ

Zip Code

08406-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

CITY PLANNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27375341

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

MR FRANK STANFIELD

Mailing Address 166 GRAVEL HILL RD

City

RAMER

State

TN

Zip Code

38367-5141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27375382

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID B BARGE

Mailing Address PO BOX 987

City

EVANSVILLE

State

WY

Zip Code

82636-0987

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27375384

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD A OLDHAM

Mailing Address 5746 N HALES CORNER RD

City

STILLMAN VALLEY

State

IL

Zip Code

61084-9721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27375473

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

MR DON H LOWTHER

Mailing Address PO BOX 1342

City

BRIDGEPORT

State

WV

Zip Code

26330-6342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27375507

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN K BULLOCK

Mailing Address 265 VILLAGE RUN W

City

ENCINITAS

State

CA

Zip Code

92024-3057

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27375543

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR KARL F CARTER

Mailing Address 525 HARRINGTON ST

City

CARLINVILLE

State

IL

Zip Code

62626-1228

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF ILLINOISOccupation
SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27375548

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS FLYNN

Mailing Address 2760 ANTHONY AVE

City

BELLMORE

State

NY

Zip Code

11710-4622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27375559

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT GABRIELSON

Mailing Address 221 N MIDLAND AVE

City

NYACK

State

NY

Zip Code

10960-1907

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27375565

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN M MORGAN

Mailing Address 88 PLEASANT ST #410

City

GLOUCESTER

State

MA

Zip Code

01930

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27375571

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN CORDES

Mailing Address 37415 COUNTY ROAD 16

City

ROGGEN

State

CO

Zip Code

80652-9426

FEC ID number of contributing
federal political committee.

C

Name of Employer
COORS ENERGY

Occupation

DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27375578

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FRITZ GRIMMER

Mailing Address PO BOX 757

City

ARBUCKLE

State

CA

Zip Code

95912-0757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27375583

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR EDWARD LOETSCHER

Mailing Address 915 11TH AVE

City

SIBLEY

State

IA

Zip Code

51249-1944

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27375585

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR NILES WHEELER

Mailing Address 342 KILLEARN RD

City

MILLBROOK

State

NY

Zip Code

12545-6219

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

OWNER RETAIL SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27375590

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BRYAN MONTGOMERY

Mailing Address 3329 ROYAL VIEW ST

City

WILLOW PARK

State

TX

Zip Code

76087-7505

FEC ID number of contributing
federal political committee.

C

Name of Employer

WIRELESS ACCESSORIES UNLI-
MITED

Occupation

WAREHOUSE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27375650

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES J BOSSONG

Mailing Address PO BOX 789

City

ASHEBORO

State

NC

Zip Code

27204-0789

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27375716

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR F H COLE

Mailing Address 6195 BOSKEY DR

City

MILLINGTON

State

TN

Zip Code

38053-6901

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNIVERSITY OF TENNESSEE

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27375725

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LEWIS W PENNELL

Mailing Address 10 HILLWOOD PL

City

NORWALK

State

CT

Zip Code

06850-1509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27375732

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

TERRY A LANGIANO

Mailing Address 24596 ROAD 148

City

TULARE

State

CA

Zip Code

93274-9374

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27375763

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR WAYNE W W PERRY

Mailing Address W5597 PERRY LN

City

FORT ATKINSON

State

WI

Zip Code

53538-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27375768

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EARL W W GOLDSMITH

Mailing Address 4703 COUNTY ROAD 59

City

BUTLER

State

IN

Zip Code

46721-9747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27375785

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT RINKE

Mailing Address PO BOX 5244

City

KALISPELL

State

MT

Zip Code

59903-5244

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27375833

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM R WILSON, JR

Mailing Address 233 GRANT AVE

City

CLARENDON HILLS

State

IL

Zip Code

60514-1326

FEC ID number of contributing
federal political committee.

C

Name of Employer
DW INVESTMENTS

Occupation
BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27375869

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 153 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DARRELL J EWERT

Mailing Address 18182 E DORADO AVE

City

CENTENNIAL

State

CO

Zip Code

80015-3077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Transaction ID: 27375888

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR K M CAMIZZI

Mailing Address 6172 GARDEN CITY RD

City

CRESTVIEW

State

FL

Zip Code

32539-9186

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERAL CIVIL SERVICE

Occupation

FORESTRY TECHNICIAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

532.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	8

Transaction ID: 27375901

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR HARRY R JORGENSEN

Mailing Address 12825 PEMBROKE CIR

City

LEAWOOD

State

KS

Zip Code

66209-1625

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARRY R JORGENSEN INC

Occupation

SALESMAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27375969

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 154 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDWARD PATRICK

Mailing Address 2325 HIGHLAND AVE W

City

YORKVILLE

State

NY

Zip Code

13495-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27375994

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES B MCNEIL

Mailing Address PO BOX 934

City

CLEARFIELD

State

PA

Zip Code

16830-0934

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27376020

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT F STAHLKUPPE

Mailing Address 1859 HUNNICUT RD

City

HIAWASSEE

State

GA

Zip Code

30546-2042

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

PHYSICIAN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27376053

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR SAMUEL P WRIGHT

Mailing Address 4715 BOONSBORO RD APT 99

City

LYNCHBURG

State

VA

Zip Code

24503-2237

FEC ID number of contributing
federal political committee.

C

Name of Employer
C.S.X. TRANSPORTATION

Occupation

SIGNALMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27376063

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR DELBERT D HEUSZEL

Mailing Address 1956 S HILLSIDE RD

City

SOUTH HAVEN

State

KS

Zip Code

67140-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27376094

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DELBERT D HEUSZEL

Mailing Address 1956 S HILLSIDE RD

City

SOUTH HAVEN

State

KS

Zip Code

67140-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

517.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	0	8

Transaction ID: 27376097

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DANA J HAHN

Mailing Address 11725 INSPIRATION DR

City

EAGLE RIVER

State

AK

Zip Code

99577-7918

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27376103

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR C D STANTON

Mailing Address 5440 CAHUILLA AVE

City

TWENTYNINE PALMS

State

CA

Zip Code

92277-1416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27376144

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES E HENSEL

Mailing Address 16492 CSAH 9

City

HUTCHINSON

State

MN

Zip Code

55350-7315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27376216

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES T JOHNSTON

Mailing Address 733 BARBADOS DR

City

WILLIAMSTOWN

State

NJ

Zip Code

08094-3006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27376220

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID W W JOHNSON

Mailing Address PO BOX 1333

City

LYONS

State

CO

Zip Code

80540-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27376269

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR IRWIN A OLSON

Mailing Address 1025 HEARTWOOD AVE

City

VALLEJO

State

CA

Zip Code

94591-5646

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNION OIL CO OF CALIF

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27376271

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HAROLD HASKINS

Mailing Address 9804 67TH AVENUE CT E

City

PUYALLUP

State

WA

Zip Code

98373-1141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27376302

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES M REICH

Mailing Address 8839 WINCHESTER AVE

City

PHILADELPHIA

State

PA

Zip Code

19115-5104

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27376349

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

F DIEKMAN

Mailing Address 3212 LASALLE ST

City

RACINE

State

WI

Zip Code

53402-3900

FEC ID number of contributing
federal political committee.

C

Name of Employer

KRANZ INC

Occupation

DRIVER/DOCKMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	8

Transaction ID: 27376361

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TOM HADDOCK

Mailing Address 375 SMITH ST

City

FARMINGDALE

State

NY

Zip Code

11735-1106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27376366

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH HUUS

Mailing Address PO BOX 4291

City

WILLISTON

State

ND

Zip Code

58802-4291

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

MOBIL HOME REPAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27376388

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR CAMPBELL A GRIFFIN, JR

Mailing Address 1000 UPTOWN PARK BLVD APT 201

City

HOUSTON

State

TX

Zip Code

77056-3249

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27376410

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS J KOKOT

Mailing Address 1377 WENTWORTH AVE

City

CALUMET CITY

State

IL

Zip Code

60409-6039

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARCELOREMITTAL USA

Occupation

STEELWORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27376414

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR BURTON E GINTHER

Mailing Address 1461 S 2ND RD SW

City

FAIRFIELD

State

MT

Zip Code

59436-9535

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27376421

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR CHAS MERRILL

Mailing Address 15253 SE LAURIE AVE

City

PORTLAND

State

OR

Zip Code

97267-2531

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27376446

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE M PARSONS, III

Mailing Address 1097 LYNNGATE DR SE

City

HUNTSVILLE

State

AL

Zip Code

35803-3927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27376547

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR DELBERT D HEUSZEL

Mailing Address 1956 S HILLSIDE RD

City

SOUTH HAVEN

State

KS

Zip Code

67140-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27376583

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL MARTIN

Mailing Address 1808 ALMA DR

City

CREST HILL

State

IL

Zip Code

60403-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer
CATERPILLAR TRACTOR CO

Occupation
PAINTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27376604

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR A G G SHERWIN

Mailing Address 30 PINE LAKE DR

City

OLDSMAR

State

FL

Zip Code

34677-2030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27376612

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT BOHNET

Mailing Address PO BOX 548

City

ELKTON

State

OR

Zip Code

97436-0548

FEC ID number of contributing
federal political committee.

C

Name of Employer

WILDISH

Occupation

MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27376628

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MAURICE MILLER

Mailing Address 1405 14TH AVE NE

City

BRAINERD

State

MN

Zip Code

56401-2116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27376664

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR IRWIN A OLSON

Mailing Address 1025 HEARTWOOD AVE

City

VALLEJO

State

CA

Zip Code

94591-5646

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNION OIL CO OF CALIFOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	8

Transaction ID: 27376675

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN A HEBERT, JR

Mailing Address PO BOX 596

City

SHERIDAN

State

OR

Zip Code

97378-0596

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE FARM INSURANCE COOccupation
CLAIMS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27376696

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT H MITCHELL

Mailing Address PO BOX 171

City

KLAMATH FALLS

State

OR

Zip Code

97601-0305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Transaction ID: 27376697

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT H MITCHELL

Mailing Address PO BOX 171

City

KLAMATH FALLS

State

OR

Zip Code

97601-0305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27376699

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MR HAROLD M IBACH

Mailing Address 3303 GLEN OAKS AVE

City

WHITE BEAR LAKE

State

MN

Zip Code

55110-5605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27376804

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT WANG

Mailing Address 5806 BAYBERRY WAY

City

SUGAR LAND

State

TX

Zip Code

77479-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27376815

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RAY WINDLE

Mailing Address 3705 GRANADA TRL

City

DENTON

State

TX

Zip Code

76205-5515

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27376822

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR BERNARD E E DICKEY

Mailing Address PO BOX 1082

City

PAHRUMP

State

NV

Zip Code

89041-1082

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27376836

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR HAROLD M IBACH

Mailing Address 3303 GLEN OAKS AVE

City

WHITE BEAR LAKE

State

MN

Zip Code

55110-5605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27376848

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DENNYS WAHLER

Mailing Address 267 TICE RD

City

MAINESBURG

State

PA

Zip Code

16932-9476

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27376856

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JIM DOHERTY

Mailing Address 1347 E CARACAS AVE

City

HERSHEY

State

PA

Zip Code

17033-1104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27376886

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR GARY GODWIN

Mailing Address 2933 HIGHWAY 299

City

PRESCOTT

State

AR

Zip Code

71857-7023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.18

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27376903

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DENNYS WAHLER

Mailing Address 267 TICE RD

City

MAINESBURG

State

PA

Zip Code

16932-9476

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27376908

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR EARL RODMAN

Mailing Address PO BOX 12250

City

ODESSA

State

TX

Zip Code

79768-2250

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
ENGINEER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27376913

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR BOBBY L LEWIS

Mailing Address 8425 BREEZEWOOD DR

City

OKLAHOMA CITY

State

OK

Zip Code

73135-6107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27376960

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE M PARSONS, III

Mailing Address 1097 LYNNGATE DR SE

City

HUNTSVILLE

State

AL

Zip Code

35803-3927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27377029

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MR WAYNE E HOLM

Mailing Address 15209 NW MASON HILL RD

City

NORTH PLAINS

State

OR

Zip Code

97133-8196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27377031

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ELTON W JONES

Mailing Address 3797 LONGHORN DR

City

HAMILTON

State

OH

Zip Code

45013-8426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27377036

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDWARD J J RESKE, III

Mailing Address 1004 SHARPSBURG DR SE

City

HUNTSVILLE

State

AL

Zip Code

35803-2340

FEC ID number of contributing
federal political committee.

C

Name of Employer
NASA

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27377042

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR CURTIS R ROGHAIR

Mailing Address PO BOX 5

City

OKATON

State

SD

Zip Code

57562-0005

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
RANCHER / FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27377052

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT E SMITH

Mailing Address 12205 217TH AVENUE CT E

City

BONNEY LAKE

State

WA

Zip Code

98391-7622

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27377053

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

1295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LEO TREMBLAY

Mailing Address 2583 CENTRE ST

City

BOSTON

State

MA

Zip Code

02132-6221

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27377129

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR JERRY HIGHLAND

Mailing Address 10868 W SAGEWOOD RD

City

NINE MILE FALLS

State

WA

Zip Code

99026-9401

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27377164

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR BILL GLASER

Mailing Address 2639 CEDAR AVE

City

SAINT PAUL

State

MN

Zip Code

55110-4563

FEC ID number of contributing
federal political committee.

C

Name of Employer
ADVANCE CIRCUITS

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27377213

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN L ILLES

Mailing Address 1788 AMARONE WAY

City

HENDERSON

State

NV

Zip Code

89012-7220

FEC ID number of contributing
federal political committee.

C

Name of Employer

CLIENT DEVELOPMENT SERVIC-
ES

Occupation

PRESIDENT & COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27377248

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MR CRAIG MILLER

Mailing Address PO BOX 1181

City

TAHOE CITY

State

CA

Zip Code

96145-1181

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27377278

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR MARK SIMMONS

Mailing Address 111 OAK CREST DR NW

City

WINTER HAVEN

State

FL

Zip Code

33881-1460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27377325

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1075.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ALLAN C COLE

Mailing Address 4561 WESTCHESTER LN

City

PADUCAH

State

KY

Zip Code

42003-8832

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27377367

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD PALUCKI

Mailing Address 6067 GOLDEN NECTAR WAY

City

LAS VEGAS

State

NV

Zip Code

89142-0624

FEC ID number of contributing
federal political committee.

C

Name of Employer
NATL BY PRODUCTS

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27377391

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR KEVIN MAHONEY

Mailing Address 4588 ROCKEFELLER RD

City

AUBURN

State

NY

Zip Code

13021-9621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27377425

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHARLES A TAYLOR

Mailing Address 427 GRAND CONCOURSE

City

MIAMI SHORES

State

FL

Zip Code

33138-2462

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27377439

Amount of Each Receipt this Period

850.00

B.

Full Name (Last, First, Middle Initial)

MR JOSEPH F FENNYCH

Mailing Address 1113 RIVERVIEW AVE

City

CONWAY

State

PA

Zip Code

15027-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27377462

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR BOB SCHJERVEN

Mailing Address 812 WOODHAVEN DR

City

HIGHLAND VILLAGE

State

TX

Zip Code

75077-6404

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27377487

Amount of Each Receipt this Period

525.00

SUBTOTAL of Receipts This Page (optional)

1575.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MARK D LEASE

Mailing Address 326 OATES DR

City

FAYETTEVILLE

State

NC

Zip Code

28311-2174

FEC ID number of contributing
federal political committee.

C

Name of Employer

KELLY SPRINGFIELD GOODYEAR

Occupation

MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27377555

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

MR PATRICK P BROWN

Mailing Address 2533 STATE HIGHWAY 508

City

ONALASKA

State

WA

Zip Code

98570-9645

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 8

Transaction ID: 27377610

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

VERNAL REYNOLDS

Mailing Address 10698 102 RD

City

DODGE CITY

State

KS

Zip Code

67801-6572

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27377667

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PERRY E E SMITH, JR

Mailing Address 34 MATINECOCK LN

City

LOCUST VALLEY

State

NY

Zip Code

11560-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAIRVIEW SVC STAT

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27377704

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR W R MASSEY

Mailing Address PO BOX 514

City

CANYON CREEK

State

MT

Zip Code

59633-0514

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27377732

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR LYLE C DOERR

Mailing Address 7198 KEATS AVE N

City

STILLWATER

State

MN

Zip Code

55082-9368

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27377759

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 176 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

COL GORDON B B ROGERS

Mailing Address 912 LISMORE DR

City

COLUMBUS

State

GA

Zip Code

31904-2470

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27377778

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS B BRADFORD

Mailing Address 703 SW 1ST ST

City

CASEY

State

IL

Zip Code

62420-1313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27377795

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT E DOMINE

Mailing Address 107 E MILL ST

City

LOYAL

State

WI

Zip Code

54446-9587

FEC ID number of contributing
federal political committee.

C

Name of Employer
EDGERTON CONTRACTORS

Occupation
CONSTRUCTION WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27377865

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1045.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES ROMELHART

Mailing Address 405 PUBLIC WELLS RD

City

MARTIN

State

TN

Zip Code

38237-8601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27377918

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH D D EAKINS

Mailing Address 3105 COUNTY ROAD 434

City

STEPHENVILLE

State

TX

Zip Code

76401-8955

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	0	8

Transaction ID: 27377922

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MS JOAN F FOERSTER

Mailing Address 1882 FERNRIDGE DR

City

SAN DIMAS

State

CA

Zip Code

91773-1308

FEC ID number of contributing
federal political committee.

C

Name of Employer
BALDWIN PARK UNIFIED SCHO-
OL DIOccupation
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27377951

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

CMSGT GEORGE B ALVORD

Mailing Address 48 MARGARET RD

City

MONROE

State

NY

Zip Code

10950-4536

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEPARTMENT OF ARMY

Occupation
LOGISTICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27377962

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM T KIDD

Mailing Address 6505 MATLOCK RD

City

GRANBURY

State

TX

Zip Code

76049-6322

FEC ID number of contributing
federal political committee.

C

Name of Employer
US GOVT

Occupation
ENG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27377973

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR JAY B ASHWORTH

Mailing Address PO BOX 237

City

AMERICAN FORK

State

UT

Zip Code

84003-0237

FEC ID number of contributing
federal political committee.

C

Name of Employer
BLUEHOST.COM / HOSTMONSTE-
R.COM

Occupation
FRAUD/VERIFICATION DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27377979

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM V V SHUMATE

Mailing Address 539 HITCHRACK RD

City

BAILEY

State

CO

Zip Code

80421-1019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27377983

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR LEIGHTON SMITH

Mailing Address 301 HARBOR ST

City

DEL RIO

State

TX

Zip Code

78840-0488

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27377997

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM T KIDD

Mailing Address 6505 MATLOCK RD

City

GRANBURY

State

TX

Zip Code

76049-6322

FEC ID number of contributing
federal political committee.

C

Name of Employer

US GOVT

Occupation

ENG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27378002

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 180 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR R SINCLAIR

Mailing Address 3646 CHELSEA CT

City

PLEASANTON

State

CA

Zip Code

94588-3410

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27378009

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR WAYNE PREMENTINE

Mailing Address 15828 MADDOX RD

City

STEWARTSTOWN

State

PA

Zip Code

17363-8267

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHILDRENS HOSPITAL

Occupation
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27378017

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR DODGE ALEXANDER

Mailing Address 5430 E EDWIN RD

City

TUCSON

State

AZ

Zip Code

85739-1924

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27378071

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ALLEN B FORBES

Mailing Address 1560 SW DYER POINT RD

City

PALM CITY

State

FL

Zip Code

34990-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27378089

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DANIEL G LANNI

Mailing Address 1710 HILLSIDE AVE

City

ORANGE CITY

State

FL

Zip Code

32763-7521

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27378094

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR MORGAN B SMITH

Mailing Address 1122 MOUNT WHITNEY WAY

City

SANTA MARIA

State

CA

Zip Code

93454-2660

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY OF SANTA MONICA

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27378137

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR SCOTT FRASER

Mailing Address 5211 MYRA AVE

City

CYPRESS

State

CA

Zip Code

90630-4442

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALLSTATE INSURANCE

Occupation

FRAUD INVESTIGATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27378141

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JEFF CARGILE

Mailing Address 552 BLODGETT VIEW DR

City

HAMILTON

State

MT

Zip Code

59840-9354

FEC ID number of contributing
federal political committee.

C

Name of Employer
LUBE QUICK

Occupation

LUBE TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27378144

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ANDREW J ROSENAU

Mailing Address 15 MORNING DOVE CIR

City

SACRAMENTO

State

CA

Zip Code

95833-1627

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY CORPS OF ENGINEERS

Occupation

BIOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27378153

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STANLEY R CURREY

Mailing Address 451 20TH ST

City

SANTA MONICA

State

CA

Zip Code

90402-2433

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27378173

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

L O MACKEL

Mailing Address 91 ANNANDALE RD

City

PASADENA

State

CA

Zip Code

91105-1403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27378199

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

JAY MADISON

Mailing Address 9588 MUNSON HWY

City

MILTON

State

FL

Zip Code

32570-9388

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27378239

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID ROSEN

Mailing Address 1010 SPRINGFIELD LN

City

ALLEN

State

TX

Zip Code

75002-2334

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27378298

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR LARRY GLASS

Mailing Address W1490 COUNTY ROAD MM

City

NEOSHO

State

WI

Zip Code

53059-9728

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27378311

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR CHRISTOPH D PEPE

Mailing Address PO BOX 133

City

PROSPECT

State

NY

Zip Code

13435-0133

FEC ID number of contributing
federal political committee.

C

Name of Employer
MILLENNIUM ANTENNA CORP

Occupation

ELECTRICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27378323

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DARYL NEANS

Mailing Address 1700 C. R. 107

City

HUTTO

State

TX

Zip Code

78634-3265

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTRAL TEXAS ANIMAL HOSP-
ITAL

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27378331

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR PAUL ISEMINGER

Mailing Address 628 RIDER RIDGE DR

City

LONGMONT

State

CO

Zip Code

80501-4699

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMGEN INC.

Occupation

CHEMIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27378403

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR LOWELL M BERRY

Mailing Address 1056 CINNABAR CT

City

SANTA MARIA

State

CA

Zip Code

93455-3933

FEC ID number of contributing
federal political committee.

C

Name of Employer
PACIFIC BELL

Occupation

RETIRED - MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27378405

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN SHAW

Mailing Address 142 W 720TH AVE

City

FORT SCOTT

State

KS

Zip Code

66701-8782

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27378412

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR GREGG A LEIBERT

Mailing Address PO BOX 1184

City

CHEWELAH

State

WA

Zip Code

99109-1184

FEC ID number of contributing
federal political committee.

C

Name of Employer
PETROLEUM HELICOPTERS INC.

Occupation

PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27378434

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR GENE WILSON

Mailing Address 619 E ALLISON RD

City

CHEYENNE

State

WY

Zip Code

82007-2833

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27378479

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KYLE BAILEY

Mailing Address 242 DUNBAR RD

City

CHUCKEY

State

TN

Zip Code

37641-2310

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27378487

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR KYLE BAILEY

Mailing Address 242 DUNBAR RD

City

CHUCKEY

State

TN

Zip Code

37641-2310

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27378491

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM J FREAR

Mailing Address 202 NE FULTON ST

City

ROSEBURG

State

OR

Zip Code

97470-3540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27378508

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR VARTKESS HARIKIAN

Mailing Address 3253 S LOCAN AVE

City

FRESNO

State

CA

Zip Code

93725-9315

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

RETIRED - PLUMBER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27378519

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR EUGENE P DELSOL

Mailing Address 17014 CRANBROOK AVE

City

TORRANCE

State

CA

Zip Code

90504-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROCKWELL INTL

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27378530

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN J SERTICH

Mailing Address 2648 TIMBERLAKE DR

City

LA CRESCENTA

State

CA

Zip Code

91214-1446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED ENGINEER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27378564

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM C YARGER

Mailing Address 1001 E 1ST ST

City

LONG BEACH

State

CA

Zip Code

90802-5518

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27378571

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR LEROY H GOESEL

Mailing Address 5531 E EL PARQUE ST

City

LONG BEACH

State

CA

Zip Code

90815-4128

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27378579

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

DR GERALD L L COLEMAN

Mailing Address 1115 RIVER RD

City

MYSTIC

State

CT

Zip Code

06355-1223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	8

Transaction ID: 27378597

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 190 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BRUCE F SPALDING

Mailing Address 9224 N 35TH DR

City

PHOENIX

State

AZ

Zip Code

85051-3302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27378617

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR COLIN J CRIM

Mailing Address 13170B CENTRAL AVE., SE, PMB#3

City

ALBUQUERQUE

State

NM

Zip Code

87123-5588

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTH AERO, INC

Occupation
CHEIF PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27378650

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR MAYNARD G HINE

Mailing Address 2240 CROSS ST

City

LA CANADA

State

CA

Zip Code

91011-1406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27378651

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR AL FABRICUS

Mailing Address 1925 AVENUE P

City

SCOTTSBLUFF

State

NE

Zip Code

69361-2263

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27378699

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

DR C H LEONARD

Mailing Address 825 N RANCHO DR

City

LONG BEACH

State

CA

Zip Code

90815-4735

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27378702

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR ERNIE MELLON

Mailing Address 134 NEW FREEDOM RD

City

SOUTHAMPTON

State

NJ

Zip Code

08088-8829

FEC ID number of contributing
federal political committee.

C

Name of Employer
SINGER MACHINE COOccupation
MACHINIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27378712

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT WARFIELD

Mailing Address 4535 N DOUGLAS HWY

City

JUNEAU

State

AK

Zip Code

99801-9464

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27378725

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS CHRISTINE A RALPHS

Mailing Address 26314 RAVENHILL RD

City

SANTA CLARITA

State

CA

Zip Code

91387-4047

FEC ID number of contributing
federal political committee.

C

Name of Employer
CROSSMARK SO CAL

Occupation

ACCOUNT MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27378732

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR JOSEPH R MILLER

Mailing Address 1959 AVENIDA FELICIANO

City

RANCHO PALOS VERDE

State

CA

Zip Code

90275-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer
HUGHES AIRCRAFT

Occupation

ENGINEER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27378761

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD G BEAGLE

Mailing Address 1042 EL CABALLO DR

City

ARCADIA

State

CA

Zip Code

91006-1937

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

REAL ESTATE INVESTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27378769

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR ERNEST E E LAMB

Mailing Address 4163 29TH ST

City

DETROIT

State

MI

Zip Code

48210-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27378798

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD L GAUPSAS

Mailing Address 554 OCEAN VIEW AVE

City

ENCINITAS

State

CA

Zip Code

92024-2628

FEC ID number of contributing
federal political committee.

C

Name of Employer

AVANT CORP

Occupation

ENGINEER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27378859

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ALLEN G NICHOLS

Mailing Address 1206 CHARLESTON RD

City

SPENCER

State

WV

Zip Code

25276-9206

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
LABOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27378864

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR GENE THOMAS

Mailing Address PO BOX 53

City

JESUP

State

IA

Zip Code

50648-0053

FEC ID number of contributing
federal political committee.

C

Name of Employer
JOHN DEERE PRODUCT ENGINE-
ERINGOccupation
BUILD & TEST TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27378889

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

KRESS CAVE

Mailing Address 508 N CURRY ST

City

CARSON CITY

State

NV

Zip Code

89703-4127

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27378932

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 195 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MITCHELL J TAYLOR

Mailing Address PO BOX 285

City

ALHAMBRA

State

CA

Zip Code

91802-0285

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27378952

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR JIMM R METZLER

Mailing Address 1361 INGLEWOOD DR

City

STEPHENVILLE

State

TX

Zip Code

76401-1612

FEC ID number of contributing
federal political committee.

C

Name of Employer
TXU ELECTRICOccupation
POWERPLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27379029

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR RODNEY WOOLSON

Mailing Address 62 PARKHURST RD

City

OSWEGO

State

NY

Zip Code

13126-6216

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27379061

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS A GLEESON

Mailing Address 2106 OLD BAINBRIDGE RD

City

TALLAHASSEE

State

FL

Zip Code

32303-3905

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27379080

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT E E SPATIG

Mailing Address 13353 E 44TH ST

City

YUMA

State

AZ

Zip Code

85367-6223

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

CARPET INSTALLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27379101

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR MAX ULRICH

Mailing Address 1717 BRADBARY LN

City

PONCA CITY

State

OK

Zip Code

74601-2516

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27379102

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BLAIR NORTEN

Mailing Address 1010 TIMBER RIDGE RD

City

GREENSBORO

State

GA

Zip Code

30642-3911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27379125

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR GARY P OLSHEFSKI

Mailing Address 330 NOLAN WAY

City

CHULA VISTA

State

CA

Zip Code

91911-1535

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOODRICH AEROSPACE

Occupation

MANUFACTURING TECH

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27379133

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR BERTRAM C PHINNEY

Mailing Address 272 COUNTY ROAD 3342

City

KEMPNER

State

TX

Zip Code

76539-5861

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27379145

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROYCE PRIVETT

Mailing Address 9546 HINTON DR

City

SANTEE

State

CA

Zip Code

92071-2761

FEC ID number of contributing
federal political committee.

C

Name of Employer
OCEAN TECHNOLOGY INC

Occupation

PROGRAM ANALYST

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	8

Transaction ID: 27379186

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT WARFIELD

Mailing Address 4535 N DOUGLAS HWY

City

JUNEAU

State

AK

Zip Code

99801-9464

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

527.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27379215

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD E SHANKS

Mailing Address 102 RANCHO ADOLFO DR

City

CAMARILLO

State

CA

Zip Code

93012-5147

FEC ID number of contributing
federal political committee.

C

Name of Employer
GEN TEL CA

Occupation

TECH SPECIALIST

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27379221

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM BUSS

Mailing Address 16099 MACKINAW WAY

City

GRASS VALLEY

State

CA

Zip Code

95949-8778

FEC ID number of contributing
federal political committee.

C

Name of Employer
AIRCO MECHANICAL

Occupation

PLUMBER/WELDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27379230

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

LEE JOHNSON

Mailing Address PO BOX 310

City

BOERNE

State

TX

Zip Code

78006-0310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27379295

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR RICK TRAVERSO

Mailing Address 19726 53RD AVE NE

City

LAKE FOREST PARK

State

WA

Zip Code

98155-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY OF SEATTLE

Occupation

POLICE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27379299

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES R CHRONAKER

Mailing Address STREET 10, LOT 26
10505 CEDARVILLE ROAD

City State Zip Code
BRANDYWINE MD 20613

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARYLAND NATURAL RESOURCES

Occupation
POLICE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1199.16

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27379353

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE J WILLIAMS, JR

Mailing Address 107 BOVARD ST

City State Zip Code
YERINGTON NV 89447-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27379376

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE J WILLIAMS, JR

Mailing Address 107 BOVARD ST

City State Zip Code
YERINGTON NV 89447-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27379377

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN MARTIN

Mailing Address PO BOX 1646

City

LEXINGTON

State

SC

Zip Code

29071-1646

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27379383

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT B WISBON

Mailing Address PO BOX 27286

City

SAN DIEGO

State

CA

Zip Code

92198-1286

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27379423

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR PHILIP H FRY, JR

Mailing Address 155 RISSMAN LN

City

ORTONVILLE

State

MI

Zip Code

48462-9076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27379426

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

620.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL G MORRIS

Mailing Address 4497 W FORK RD

City

DARBY

State

MT

Zip Code

59829-9602

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHAMPION INTL

Occupation
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27379484

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JACK EDMISTON

Mailing Address PO BOX 125

City

VOCA

State

TX

Zip Code

76887-0125

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27379502

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR RONALD B HUNTER

Mailing Address 906 BRITTANY PARK BLVD

City

TARPON SPRINGS

State

FL

Zip Code

34689-5742

FEC ID number of contributing
federal political committee.

C

Name of Employer
REIMELT CORPORATION

Occupation
PURCHASING AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27379511

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KEN TRINTER

Mailing Address 13 DAYTON CRES

City

BERNARDSVILLE

State

NJ

Zip Code

07924-2704

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27379515

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR PETER W PERCY

Mailing Address 968 OLYMPIA AVE

City

VENTURA

State

CA

Zip Code

93004-2219

FEC ID number of contributing
federal political committee.

C

Name of Employer
CA DEPT OF INSURANCE

Occupation
CRIMINAL INVESTIGATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27379517

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR HERMAN ECKARD

Mailing Address 701 TOURNAMENT TRL

City

CORTLAND

State

OH

Zip Code

44410-8707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27379545

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WAYNE C BIESECKER

Mailing Address 8277 TIARA ST

City

VENTURA

State

CA

Zip Code

93004-2006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27379573

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR WAYNE C BIESECKER

Mailing Address 8277 TIARA ST

City

VENTURA

State

CA

Zip Code

93004-2006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27379574

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MITCHELL J TAYLOR

Mailing Address PO BOX 285

City

ALHAMBRA

State

CA

Zip Code

91802-0285

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27379616

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

H C STEVENSON

Mailing Address 4536 RYDER LN

City

NORTH LAS VEGAS

State

NV

Zip Code

89031-2273

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27379658

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR MARK A HUNTER

Mailing Address 3542 HUNTER LN

City

RICHMOND

State

VA

Zip Code

23237-2714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.21

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27379664

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR RUSSELL K KIRKLAND

Mailing Address 1655 ADELAIDA RD

City

PASO ROBLES

State

CA

Zip Code

93446-7765

FEC ID number of contributing
federal political committee.

C

Name of Employer
PASO ROBLES WELDING

Occupation

WELDER OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	8

Transaction ID: 27379708

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RUSSELL K KIRKLAND

Mailing Address 1655 ADELAIDA RD

City

PASO ROBLES

State

CA

Zip Code

93446-7765

FEC ID number of contributing
federal political committee.

C

Name of Employer
PASO ROBLES WELDING

Occupation

WELDER OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27379710

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR RIGSBY HALL

Mailing Address 284 DONALD PERKINS RD

City

PITKIN

State

LA

Zip Code

70656-4120

FEC ID number of contributing
federal political committee.

C

Name of Employer
FORENTA L.P.

Occupation

SALESMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27379722

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES CAMDEN

Mailing Address 712 S CRESCENT AVE

City

LODI

State

CA

Zip Code

95240-4608

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARE ISLAND NAVAL SHIPYARD

Occupation

RETIRED - MARINE MACHINIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27379740

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD SIMONIAN

Mailing Address 763 N RODEO CIR

City

ORANGE

State

CA

Zip Code

92869-2301

FEC ID number of contributing
federal political committee.

C

Name of Employer

SANTIAGO MANAGEMENT CO INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27379757

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR JOSEPH FERRAVANTI

Mailing Address 5095 STOCKDALE RD

City

PASO ROBLES

State

CA

Zip Code

93446-8643

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27379764

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR RONALD DOBBS

Mailing Address 7261 E 22ND AVE

City

ANCHORAGE

State

AK

Zip Code

99504-3405

FEC ID number of contributing
federal political committee.

C

Name of Employer

CH2M HILL

Occupation

CONSTRUCTION LABOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27379788

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT STONE

Mailing Address 1439 WHITTIER AVE

City

CLAREMONT

State

CA

Zip Code

91711-3353

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27379816

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR STUART L WALKER

Mailing Address 265 COUNTRY CLUB PL

City

SPRING CREEK

State

NV

Zip Code

89815-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27379828

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JIM B FITZGERALD

Mailing Address 559 LONGBRANCH RD

City

HOHENWALD

State

TN

Zip Code

38462-5067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27379833

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 209 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LARRY C C BENSON

Mailing Address PO BOX 92

City

SISTERS

State

OR

Zip Code

97759-0092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27379835

Amount of Each Receipt this Period

120.00

B.

Full Name (Last, First, Middle Initial)

MR GREG PITANIELLO

Mailing Address PO BOX 541

City

BARBOURSVILLE

State

WV

Zip Code

25504-0541

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27379839

Amount of Each Receipt this Period

700.00

C.

Full Name (Last, First, Middle Initial)

MR BERNARD F MRAZ

Mailing Address 456 ANDREW CIR

City

MARINA

State

CA

Zip Code

93933-3316

FEC ID number of contributing
federal political committee.

C

Name of Employer
ESKATON MONTEREY HOSPITAL

Occupation
MAINT ENGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27379845

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PATRICK A KLINZMANN

Mailing Address 17491 COUNTY ROAD 32

City

STERLING

State

CO

Zip Code

80751-9431

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27379856

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR TONY G CALVILLO

Mailing Address 3013 ARNOLD ST

City

BAKERSFIELD

State

CA

Zip Code

93305-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27379862

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD H CLARK

Mailing Address 686 TOWNE STREET

City

GRANTS PASS

State

OR

Zip Code

97527

FEC ID number of contributing
federal political committee.

C

Name of Employer

OREGON BANK

Occupation

BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27379912

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR SAMMIE A HALL

Mailing Address 668 SPRINGFIELD AVE

City

VENTURA

State

CA

Zip Code

93004-2104

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 27379931

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR EDWARD R MCDERMOTT, JR

Mailing Address PO BOX 40

City

POLVADERA

State

NM

Zip Code

87828-0040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27379935

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MR OWEN P JONES

Mailing Address 133 TANGLEWOOD RD

City

DEBARY

State

FL

Zip Code

32713-4450

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27379966

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOSEPH F VEVERKA

Mailing Address 2 WHITE CHURCH RD

City

BROOKTONDALE

State

NY

Zip Code

14817-9799

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27379968

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR KIRK D SCHROEDER

Mailing Address 32320 MYRNA ST

City

LIVONIA

State

MI

Zip Code

48154-3136

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27379999

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR LARRY CLEMENS

Mailing Address 18518 13TH AVE NE

City

POULSBO

State

WA

Zip Code

98370-7669

FEC ID number of contributing
federal political committee.

C

Name of Employer

ORION CAPITAL

Occupation

CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27380041

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JERRY D DROPPLEMAN

Mailing Address 16898 E NAPA DR

City

AURORA

State

CO

Zip Code

80013-2918

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE BOEING COOccupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27380047

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JERRY D DROPPLEMAN

Mailing Address 16898 E NAPA DR

City

AURORA

State

CO

Zip Code

80013-2918

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE BOEING COOccupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27380049

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT A SWANSON

Mailing Address 5758 SOLEDAD RD

City

LA JOLLA

State

CA

Zip Code

92037-7051

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF CAOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27380050

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 214 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES W ROLLINS

Mailing Address PO BOX 450543

City

LAREDO

State

TX

Zip Code

78045-0013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27380054

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR PHILLIP G CHAVEZ, JR

Mailing Address 925 GARDNER AVE

City

CORCORAN

State

CA

Zip Code

93212-2412

FEC ID number of contributing
federal political committee.

C

Name of Employer

TACHI PALACE HOTEL & CASINO

Occupation

SECURITY OFFICER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27380090

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR MARK N OUDERKIRK

Mailing Address 27 HOPEWELL DR

City

STONY BROOK

State

NY

Zip Code

11790-2323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

293.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27380101

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 215 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STANLEY C MILLAR

Mailing Address 3255 W PEBBLE RD

City

LAS VEGAS

State

NV

Zip Code

89139-7813

FEC ID number of contributing
federal political committee.

C

Name of Employer
CA HIGHWAY PATROLMAN

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27380118

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN D BRAUN

Mailing Address 1511 VIA ROSA

City

PASO ROBLES

State

CA

Zip Code

93446-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27380126

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID DONALDSON

Mailing Address 3609 OAK HOLLOW CIR APT 203

City

MEMPHIS

State

TN

Zip Code

38116-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENNESSEE STATE GOVERNMENT

Occupation
TAX AUDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27380127

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVE H WRIGHT

Mailing Address PO BOX 412

City

CONCRETE

State

WA

Zip Code

98237-0412

FEC ID number of contributing
federal political committee.

C

Name of Employer
AHMR INC.

Occupation

GROCERYMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27380183

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT CIOCCO

Mailing Address 626 JAMES LN

City

RIVERVALE

State

NJ

Zip Code

07675-6451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27380251

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR DENNIS CREEDON

Mailing Address 4406 ORCHARD LN

City

CINCINNATI

State

OH

Zip Code

45236-3181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27380257

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JULIUS C C HENRIQUES

Mailing Address 21280 GREENTREE LN

City

SONORA

State

CA

Zip Code

95370-9576

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27380279

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR JULIUS C C HENRIQUES

Mailing Address 21280 GREENTREE LN

City

SONORA

State

CA

Zip Code

95370-9576

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27380281

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR KENNY SHUFF

Mailing Address RR 1 BOX 203

City

MODE

State

IL

Zip Code

62444-9728

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27380292

Amount of Each Receipt this Period

175.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN W ROLPH

Mailing Address 525 MAINE AVE

City

ADRIAN

State

MN

Zip Code

56110-1083

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27380396

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES M CORNEBY

Mailing Address 9114 E AUTUMN SAGE ST

City

TUCSON

State

AZ

Zip Code

85747-5272

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27380399

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR A R GREBE

Mailing Address PO BOX 576

City

FISHERS ISLAND

State

NY

Zip Code

06390-0576

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27380407

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR HENRY TSARNAS

Mailing Address PO BOX 164

City State Zip Code
MYERS FLAT CA 95554-0164

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
LUMBER MILL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27380435

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
MR ROGER B B WILCOX

Mailing Address 357 FRANKLIN AVE

City State Zip Code
FORTUNA CA 95540-2535

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOCKHEED

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27380445

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
MR ROBERT L SKIDMORE

Mailing Address 2116 BRIGHTON SPRINGS ST

City State Zip Code
LAS VEGAS NV 89128-6772

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27380478

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FRANCIS E WALDORF

Mailing Address 117 ANNIE LN

City

GUN BARREL CITY

State

TX

Zip Code

75156-5139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27380494

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JACK FETTIG

Mailing Address 3840 JEFFERSON SCIO DR SE

City

JEFFERSON

State

OR

Zip Code

97352-9451

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27380534

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR R CLARK

Mailing Address 128 RIVER RIDGE RD APT C1

City

ALEXANDER CITY

State

AL

Zip Code

35010-9181

FEC ID number of contributing
federal political committee.

C

Name of Employer
N.Y.C.

Occupation

POLICE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27380539

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR JOHN OPALKA

Mailing Address 4825 S HIGHWAY 95 STE 5

City

FORT MOHAVE

State

AZ

Zip Code

86426-8315

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27380548

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR GERARD J BABIN

Mailing Address 57 BUCK BRANCH SCHOOL RD

City

POPLARVILLE

State

MS

Zip Code

39470-6155

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27380569

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR ADELBERT G G BABLO

Mailing Address 506 MARINA BLVD

City

SUISUN CITY

State

CA

Zip Code

94585-2757

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHEVRON

Occupation

LAB TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27380577

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES C KAHLE

Mailing Address 1894 SHILLING RD

City

PALMYRA

State

NY

Zip Code

14522-9368

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27380589

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT J SCHOLLE

Mailing Address 18440 MAIN BLVD

City

LOS GATOS

State

CA

Zip Code

95033-8540

FEC ID number of contributing
federal political committee.

C

Name of Employer

IBM

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27380590

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR FRANK E ROGERS

Mailing Address PO BOX 335

City

GRAYSVILLE

State

AL

Zip Code

35073-0335

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27380632

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

620.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MS MARY E PORTER

Mailing Address PO BOX 1710

City State Zip Code
GARDNERVILLE NV 89410-1710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27380633

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)
MR WILLIAM KILLINGSWORTH

Mailing Address 1012 HIGHLAND DR

City State Zip Code
PALESTINE TX 75801-5226

FEC ID number of contributing
federal political committee.

C

Name of Employer
AROSE HIGH SCHOOL

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27380676

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
DR RONALD E ALLEN

Mailing Address 5412 HOME CT

City State Zip Code
CARMICHAEL CA 95608-5004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27380699

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR RONALD E ALLEN

Mailing Address 5412 HOME CT

City

CARMICHAEL

State

CA

Zip Code

95608-5004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27380701

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR GARY BARR

Mailing Address 419 W CASS ST

City

OSCEOLA

State

IA

Zip Code

50213-1542

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27380704

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN W WOLFENDEN

Mailing Address 6020 S SHINGLE RD

City

SHINGLE SPRINGS

State

CA

Zip Code

95682-7514

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27380715

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID MCDONALD

Mailing Address PO BOX 2991

City

GRAND JUNCTION

State

CO

Zip Code

81502-2991

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27380728

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ALAN F MORASCH

Mailing Address P.O. BOX 4428

City

CAMP CONNELL

State

CA

Zip Code

95223-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer
US POST OFFICE

Occupation
CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27380731

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES D LOMBARD

Mailing Address 16400 WILLOW CREEK RD

City

OCCIDENTAL

State

CA

Zip Code

95465-9204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27380739

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

GLENN D MOORE

Mailing Address PO BOX 838

City

FLORENCE

State

MT

Zip Code

59833-0838

FEC ID number of contributing
federal political committee.

C

Name of Employer
WESTERN UNION

Occupation

COMPUTER TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27380759

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR GLEN WOOD

Mailing Address 91 DUSTY LN

City

ASHFORD

State

AL

Zip Code

36312-6343

FEC ID number of contributing
federal political committee.

C

Name of Employer
COOKBROS

Occupation

SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	8

Transaction ID: 27380777

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR ERNEST L DIXON

Mailing Address PO BOX 123

City

THORNTON

State

CA

Zip Code

95686-0123

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27380820

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

445.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 227 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JEFFREY P KRUGER

Mailing Address 37 MUSSER RD

City

CODY

State

WY

Zip Code

82414-9623

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	8

Transaction ID: 27380857

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS K GAUMER

Mailing Address 8140 E BROADWAY BLVD APT 101

City

TUCSON

State

AZ

Zip Code

85710-3912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Transaction ID: 27380869

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

JAN H FISHER

Mailing Address 2213 STATE ROAD 225 E

City

BATTLE GROUND

State

IN

Zip Code

47920-9438

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

Transaction ID: 27380878

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 228 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM I BUTLER

Mailing Address 6212 COYLE AVE

City

CARMICHAEL

State

CA

Zip Code

95608-0435

FEC ID number of contributing
federal political committee.

C

Name of Employer
MC CLELLAN AFB CA

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27380895

Amount of Each Receipt this Period

85.00

B.

Full Name (Last, First, Middle Initial)

MR LANCE J TURNER

Mailing Address 6103 JAMAICA CT

City

FLEMING ISLAND

State

FL

Zip Code

32003-8007

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARE ISLAND NAVY YARD

Occupation
SHEETMETAL MECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27380905

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM C SMITH

Mailing Address 4919 MEADOWBROOK LN

City

ORION

State

MI

Zip Code

48359-2041

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTH OAKLAND MED CTR.

Occupation
SECURITY GUARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27380960

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FREDERICK E EVANS

Mailing Address PO BOX 93

City

VALLEY SPRINGS

State

CA

Zip Code

95252-0093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27381000

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR C TAUTKUS

Mailing Address 84 ANDREW FORD WAY

City

ABINGTON

State

MA

Zip Code

02351-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27381022

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MRS ADELINE KIEPER

Mailing Address 308 E. TOWNE DR

City

ANTIGO

State

WI

Zip Code

54409-2571

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27381034

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR DONALD W BOWLES

Mailing Address PO BOX 235

City State Zip Code
CHALLENGE CA 95925-0235

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27381079

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)
MRS V H PRICE

Mailing Address 1284 KANAKA RAPIDS RD

City State Zip Code
BUHL ID 83316-5171

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27381083

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MR VIRGIL JOCHIMSEN

Mailing Address 1905 CHANDAWAY DR

City State Zip Code
PELHAM AL 35124-1419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27381156

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT B TREACY

Mailing Address 375 HOUGHTON RD

City

NORTHFIELD

State

OH

Zip Code

44067-1157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27381170

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT T MARTIN

Mailing Address PO BOX 792139

City

PAIA

State

HI

Zip Code

96779-2139

FEC ID number of contributing
federal political committee.

C

Name of Employer
BIOLOGICAL APPLICATIONS
INC

Occupation

OWNER AG RESERCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27381193

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR FRED OVERTON

Mailing Address 2712 CHAPEL WOOD VW

City

COLUMBIA

State

MO

Zip Code

65203-5711

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27381196

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

520.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 232 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROY VANCE

Mailing Address 105 KENDALL LN

City

BOERNE

State

TX

Zip Code

78015-8331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27381198

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR CLAYTON E DUNCAN

Mailing Address 1150 PARK CIR

City

WEST SACRAMENTO

State

CA

Zip Code

95691-3744

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED - POLICE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27381235

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR ROGER J SCHAEFER

Mailing Address 2233 TREEMONT CT S

City

SALEM

State

OR

Zip Code

97302-9432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27381281

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 233 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

OLE J HALDORSON

Mailing Address 1867 N PARK AVE

City

EUGENE

State

OR

Zip Code

97404-2194

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

Transaction ID: 27381286

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES H PAYTON

Mailing Address 1131 N MAPLE ST

City

CANBY

State

OR

Zip Code

97013-2320

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

HOMEBUILDER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27381296

Amount of Each Receipt this Period

1525.00

C.

Full Name (Last, First, Middle Initial)

MS MARY E PORTER

Mailing Address PO BOX 1710

City

GARDNERVILLE

State

NV

Zip Code

89410-1710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27381304

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ADRIAN R BEYERLE

Mailing Address 5807 SE CEDAR ST

City

MILWAUKIE

State

OR

Zip Code

97222-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY OF PORTLAND

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27381312

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR CARL D FARRIS

Mailing Address 2502 PLAZA AVE

City

SEDALIA

State

MO

Zip Code

65301-6728

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27381322

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES H KING

Mailing Address 76 E EMPIRE ST

City

SAN JOSE

State

CA

Zip Code

95112-5372

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27381332

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1055.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL R HALEY

Mailing Address PO BOX 1022

City

CAREFREE

State

AZ

Zip Code

85377-1022

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27381422

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR JOSEPH W MCRAE

Mailing Address 105 GROUSE RD

City

SUMMERVILLE

State

SC

Zip Code

29485-5106

FEC ID number of contributing
federal political committee.

C

Name of Employer
US AIR FORCE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27381433

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR GILBERT TOMLINSON

Mailing Address 3682 SELPH LANDING RD

City

PASCO

State

WA

Zip Code

99301-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27381441

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR T F CRAVER

Mailing Address 6 INDIAN HILL LN

City

HILTON HEAD ISLAND

State

SC

Zip Code

29926-1259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27381454

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR LYLE W INGOLD

Mailing Address PO BOX 1378

City

DUBOIS

State

WY

Zip Code

82513-1378

FEC ID number of contributing
federal political committee.

C

Name of Employer
CALIFORNIA DEPT OF FISH
& GAMEOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27381456

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM PEITZ

Mailing Address 354 ENTRADA CT

City

GRAND JUNCTION

State

CO

Zip Code

81503-9523

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	8

Transaction ID: 27381471

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR NICHOL C WILSON

Mailing Address 700-415 RICHMOND RD E

City

SUSANVILLE

State

CA

Zip Code

96130-5026

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27381479

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT BLATHERWICK

Mailing Address 1623 LAKE AVE

City

PINE HILL

State

NJ

Zip Code

08021-6440

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27381508

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILMER F SPICKNALL

Mailing Address 306 BRICK CHURCH RD

City

DAVIDSONVILLE

State

MD

Zip Code

21035-2001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27381559

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LOUIS W W HEBENER

Mailing Address 950 S EVERGREEN RD APT 107

City

WOODBURN

State

OR

Zip Code

97071-2976

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27381566

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

E VAN BLARICOM

Mailing Address 63890 TOWERS RD

City

JOSEPH

State

OR

Zip Code

97846-8216

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RANCHER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27381573

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR WYLIE WILLIAMS

Mailing Address 1 HARBOR CT APT 16C

City

PORTSMOUTH

State

VA

Zip Code

23704-3827

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27381590

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HERBERT J HOOKER, JR

Mailing Address 33300 OPHIR RD

City

GOLD BEACH

State

OR

Zip Code

97444-8511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27381609

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR FRANK G ZELLEY

Mailing Address 2022 LAKE RD

City

WAYZATA

State

MN

Zip Code

55391-9754

FEC ID number of contributing
federal political committee.

C

Name of Employer
RYAN COMPANIES

Occupation

CONSTRUCITON MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27381671

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM SOPER

Mailing Address 1042 LAIRD ST

City

MARSHFIELD

State

WI

Zip Code

54449-1228

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARSHFIELD CLINIC

Occupation

SR. PROGRAMMER / ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27381673

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WAYNE F DEWITT

Mailing Address 6800 FAIR MEADOWS DR

City

NORTH RICHLAND HIL

State

TX

Zip Code

76180

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27381680

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR BRUCE J J BACHMANN

Mailing Address 32 CYNTHIA RD

City

DEDHAM

State

MA

Zip Code

02026-6253

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27381695

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR SCOTTY ALLEN

Mailing Address 5454 QUEEN ANN LN

City

SANTA BARBARA

State

CA

Zip Code

93111-1029

FEC ID number of contributing
federal political committee.

C

Name of Employer

USAF

Occupation

MECH ENGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27381721

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HAROLD H ERICKSON

Mailing Address 1343 DEWEY CT

City

ROCKLEDGE

State

FL

Zip Code

32955-5104

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE BOEING COMPANY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27381723

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR GILBERT H DAMMANN

Mailing Address 17705 87TH AVE SE

City

SNOHOMISH

State

WA

Zip Code

98296-8078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27381749

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR GILBERT H DAMMANN

Mailing Address 17705 87TH AVE SE

City

SNOHOMISH

State

WA

Zip Code

98296-8078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27381751

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KENNETH L DOBSON

Mailing Address 525 NE 78TH ST

City

SEATTLE

State

WA

Zip Code

98115-4122

FEC ID number of contributing
federal political committee.

C

Name of Employer
BOEING

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 27381812

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR BOB G FRANKLIN

Mailing Address 15220 VICTORY WAY

City

SONORA

State

CA

Zip Code

95370-8876

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27381830

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR DENNIS M PEET

Mailing Address PO BOX 2046

City

WENATCHEE

State

WA

Zip Code

98807-2046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27381877

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

1255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN R R SKAGGS

Mailing Address 2601 BOWIE

City

AMARILLO

State

TX

Zip Code

79109-2109

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27381889

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MR ROGER J BUFFO

Mailing Address 7355 TRICA AVE NE

City

BREMERTON

State

WA

Zip Code

98311-4063

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27381913

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN SCHMOEGER

Mailing Address 35932 BLANK RD

City

RUSSELLVILLE

State

MO

Zip Code

65074-2938

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27381947

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROGER D PENNINGTON

Mailing Address 10701 70TH AVE NW

City

GIG HARBOR

State

WA

Zip Code

98332-8550

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27381975

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR J B MARSHALL

Mailing Address 12025 BENGE DR

City

AMARILLO

State

TX

Zip Code

79108-2849

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27381979

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE J PINYUH

Mailing Address 14205 SE 213TH ST

City

KENT

State

WA

Zip Code

98042-3129

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27381993

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DON ISHAM

Mailing Address 1273 NW 191ST ST

City

SHORELINE

State

WA

Zip Code

98177-2735

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27382002

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MR HARLAND R CHRISTENSEN

Mailing Address 11194 HAVEKOST RD

City

ANACORTES

State

WA

Zip Code

98221-8503

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
FISHERMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27382015

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

DR WILLIAM V RIDGEWAY

Mailing Address 3245 E 1ST ST

City

LONG BEACH

State

CA

Zip Code

90803-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
RETIRED ORTHODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27382030

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

305.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDMUND HIBBLER

Mailing Address 7724 EAGLE CREEK DR

City

SARASOTA

State

FL

Zip Code

34243-4647

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27382034

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN W FORSHA

Mailing Address 4124 HEMLOCK RD

City

CHERRY TREE

State

PA

Zip Code

15724

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27382042

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR KALVIN D WHIDBY

Mailing Address 3960 GROVE TRL

City

LOGANVILLE

State

GA

Zip Code

30052-7212

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27382065

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 247 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHARLES W EMERSON

Mailing Address 292 GARNER DR

City

RUSSELL SPRINGS

State

KY

Zip Code

42642-9554

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27382069

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN F ZIMMERMAN

Mailing Address 3350 VALLEY RD

City

MARYSVILLE

State

PA

Zip Code

17053-9518

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27382079

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

F J REICHERT

Mailing Address 7115 N GREENWOOD PL

City

SPOKANE

State

WA

Zip Code

99208-5063

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27382086

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 248 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DONALD R WARD

Mailing Address 1843 MAIN ST APT C3

City

LYNDEN

State

WA

Zip Code

98264-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27382135

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR BRUCE L STARR

Mailing Address 400 SENTINAL FIRS RD

City

PORT HADLOCK

State

WA

Zip Code

98339-9736

FEC ID number of contributing
federal political committee.

C

Name of Employer

US NAVY

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.31

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27382170

Amount of Each Receipt this Period

32.53

C.

Full Name (Last, First, Middle Initial)

MR GARY D D JORDAN

Mailing Address 72 EHMER RD

City

RAYMOND

State

WA

Zip Code

98577-9302

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIERD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27382183

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

92.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EVERETTE L PAGE

Mailing Address 80422 GOBBLERS KNOB

City

BUSH

State

LA

Zip Code

70431-2338

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27382188

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR ADRIAN R BEYERLE

Mailing Address 5807 SE CEDAR ST

City

MILWAUKIE

State

OR

Zip Code

97222-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY OF PORTLAND

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 8

Transaction ID: 27382200

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR WAYNE H DEMAREST

Mailing Address PO BOX 464

City

MORTON

State

WA

Zip Code

98356-0464

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27382221

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM J J CRITCHFIELD

Mailing Address 21914 EVALYN AVE

City

TORRANCE

State

CA

Zip Code

90503-6953

FEC ID number of contributing
federal political committee.

C

Name of Employer
US, DOT FAA

Occupation

LEAD AIRPORT/SAFETY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27382226

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MR LUKE ROSE

Mailing Address 64 GRAND RIO CIR

City

SACRAMENTO

State

CA

Zip Code

95826-1719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27382247

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR AL DEWLEN

Mailing Address 3024 MAPLE HILL CIR

City

WACO

State

TX

Zip Code

76708-1557

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27382258

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 251 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHARLES A KLEIN

Mailing Address 2 IVY WAY

City

DAYTON

State

NJ

Zip Code

08810-1420

FEC ID number of contributing
federal political committee.

C

Name of Employer
EDISOIN TOWNSHIP BOARD OF
ED.

Occupation
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27382291

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JERRY G PANEK

Mailing Address 3085 FULLER RD

City

COLORADO SPRINGS

State

CO

Zip Code

80920-3631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27382297

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR R W MORGAN

Mailing Address 1909 WEEPING WILLOW ST

City

BURLESON

State

TX

Zip Code

76028-6618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27382311

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

620.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDWIN HENDERSON, JR

Mailing Address 81 MILLER PARK RD

City

MILFORD

State

NJ

Zip Code

08848-1901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27382317

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR EARL F GREGG

Mailing Address 11318 E 26TH AVE

City

SPOKANE VALLEY

State

WA

Zip Code

99206-5840

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27382334

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR STEPHEN E SMITH

Mailing Address 800 CANTRALL RD

City

JACKSONVILLE

State

OR

Zip Code

97530-9156

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27382352

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 253 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DONALD MOY

Mailing Address 2005 SE CYPRESS AVE

City

PORTLAND

State

OR

Zip Code

97214-5407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27382407

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR BRUCE B B COOMBS

Mailing Address 1601 CAMDEN PARK DR SW

City

OLYMPIA

State

WA

Zip Code

98512-5504

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIMPSON TIMBER CO

Occupation

LOGGING MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27382416

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

DON C C TOMLIN, PHD

Mailing Address 1547 COUNTY ROAD 584

City

ROGERSVILLE

State

AL

Zip Code

35652-6221

FEC ID number of contributing
federal political committee.

C

Name of Employer
US BUREAU OF INDIAN AFFAIRS

Occupation

NAT.RECOURCES SPECIAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27382427

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KENNETH S HOLM

Mailing Address PO BOX 387

City

EPHRATA

State

WA

Zip Code

98823-0387

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	8

Transaction ID: 27382448

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES L TOLER, SR

Mailing Address 239 WILLIS RD

City

COVE CITY

State

NC

Zip Code

28523-9559

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27382452

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL L L MCDANIEL

Mailing Address 23426 DAHLIA CIR

City

CALIFORNIA

State

MD

Zip Code

20619-6153

FEC ID number of contributing
federal political committee.

C

Name of Employer

U.S. NAVY

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27382492

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PIERRE LAMBORN

Mailing Address 13013 E 200 SOUTH

City

COLUMBUS

State

IN

Zip Code

47203-9276

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27382515

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MAJ JERALD F F ZIERDT

Mailing Address 1409 W NORTH DRAGON DR

City

COLBERT

State

WA

Zip Code

99005-9443

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPOKANE COMMUNITY COLLEGE

Occupation

COMPUTER TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27382517

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS W HAUMONT

Mailing Address PO BOX 2373

City

NYSSA

State

OR

Zip Code

97913-0373

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27382582

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 256 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEO T BORST

Mailing Address 1755 RINGEL CT

City

MORGAN HILL

State

CA

Zip Code

95037-3381

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27382641

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR JERRY L L JACKSON

Mailing Address 1818 HATWELL ST

City

HOUSTON

State

TX

Zip Code

77023-4729

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27382649

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR H P MCCLURE

Mailing Address 112 ELDERBERRY WAY

City

SUNSET

State

SC

Zip Code

29685-2219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27382653

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

445.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 257 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LEONARD E JEROME

Mailing Address PO BOX 35

City

CHESTER

State

VT

Zip Code

05143-0035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27382663

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR CARL NEITZEL

Mailing Address PO BOX 401

City

MANCHESTER

State

WA

Zip Code

98353-0401

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27382709

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR EDDY G JONAS

Mailing Address 9136 GOLDEN GIVEN RD E

City

TACOMA

State

WA

Zip Code

98445-2172

FEC ID number of contributing
federal political committee.

C

Name of Employer

PUGET SOUND NAVAL SHIPYARD

Occupation

RIGGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27382711

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM J J CRITCHFIELD

Mailing Address 21914 EVALYN AVE

City

TORRANCE

State

CA

Zip Code

90503-6953

FEC ID number of contributing
federal political committee.

C

Name of Employer
US, DOT FAA

Occupation

LEAD AIRPORT/SAFETY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27382713

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR HENRY L BOUNDS

Mailing Address 130 ELDORADO CV

City

PEARL

State

MS

Zip Code

39208-9347

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27382732

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR ALBERT LEFEVRE

Mailing Address 150 E RIVER LN

City

ELSINORE

State

UT

Zip Code

84724

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOCIAL SECURITY ADMINISTR-
ATION

Occupation

UT STATE LEGISLATION

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27382761

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 259 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE W FENLIN

Mailing Address 2405 POINT PLEASANT RD

City

BUCHANAN

State

TN

Zip Code

38222-3698

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27382784

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID W MEVES

Mailing Address 2452 CHANTILLY TER

City

OVIDO

State

FL

Zip Code

32765-8658

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27382790

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL J NISI

Mailing Address 4109 GRAND BLVD

City

NEW PORT RICHEY

State

FL

Zip Code

34652-6006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27382795

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 260 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS SPEROPOLOUS

Mailing Address 16 BEACON ST APT 6

City

CHELSEA

State

MA

Zip Code

02150-2657

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCR TECHNOLOGIES

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27382798

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR EVERETT E CHAPMAN

Mailing Address 352 LINEBROOK RD

City

IPSWICH

State

MA

Zip Code

01938-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27382801

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR EARLE A BESTICK

Mailing Address PO BOX 190

City

COHASSET

State

MA

Zip Code

02025-0190

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27382806

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN P WENEK

Mailing Address 400 SAVIN HILL AVE APT 10

City

DORCHESTER

State

MA

Zip Code

02125-3324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27382852

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JERRY W JONES

Mailing Address 8945 MEADOW PINES CV

City

CORDOVA

State

TN

Zip Code

38016-2439

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27382863

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR WESLEY W OWEN

Mailing Address 6711 HIGHWAY 66

City

KLAMATH FALLS

State

OR

Zip Code

97601-9537

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27382883

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 262 / 1300

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN HALDEMAN

Mailing Address PO BOX 7034

City

MOORE

State

OK

Zip Code

73153-1034

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27382891

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR FRANCIS T OLOUGHLIN

Mailing Address 260 FOREST ST

City

SOUTH WEYMOUTH

State

MA

Zip Code

02190-1108

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27382907

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

COL ELDON K K TURNER

Mailing Address 8609 NICHOLS WAY

City

NORTH RICHLAND HIL

State

TX

Zip Code

76180-5357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27382929

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 263 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHARLES H MANSFIELD

Mailing Address 8821 CENTER STAKE RD

City

ALBANY

State

OH

Zip Code

45710-9208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED - CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27382974

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS CARLTON

Mailing Address 19160 HIGHLANDS LN

City

BUMPASS

State

VA

Zip Code

23024-2016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	8

Transaction ID: 27382978

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR LOUIS C BERRY

Mailing Address PO BOX 2428

City

PENSACOLA

State

FL

Zip Code

32513-2428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27382990

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 264 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FRANCIS J KASZYNSKI, JR

Mailing Address 98 DOUGLAS RD

City

BELMONT

State

MA

Zip Code

02478-3915

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27382995

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

TERRY J BRESINA

Mailing Address 32 FAIR ST

City

NORWICH

State

NY

Zip Code

13815-1604

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF NEW YORK

Occupation
VETS SERVICEOFFICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27383013

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ELMER E HARDIN

Mailing Address 1901 WIMBERLY ST

City

LONGVIEW

State

TX

Zip Code

75601-3759

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27383024

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM MARTIN

Mailing Address 5428 NEW HAVEN RD

City

TIRO

State

OH

Zip Code

44887-9702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27383043

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM MARTIN

Mailing Address 5428 NEW HAVEN RD

City

TIRO

State

OH

Zip Code

44887-9702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27383045

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL JOHNSON

Mailing Address 11 AQUARIUS DR

City

PASCO

State

WA

Zip Code

99301-8747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27383106

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES W PERKINS, JR

Mailing Address 116 JACKSON BLVD

City

NASHVILLE

State

TN

Zip Code

37205-3333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27383194

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR G E BICKERSTAFF

Mailing Address PO BOX 121

City

FYFFE

State

AL

Zip Code

35971-0121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27383211

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR G E BICKERSTAFF

Mailing Address PO BOX 121

City

FYFFE

State

AL

Zip Code

35971-0121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27383213

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILEY F LOWE

Mailing Address 31926 DOBBIN HUFSMITH RD

City

MAGNOLIA

State

TX

Zip Code

77354-6369

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27383225

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR CHRIS DONAHUE

Mailing Address PO BOX 1983

City

CAMP VERDE

State

AZ

Zip Code

86322-1983

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY OF PHOENIX

Occupation

FIREFIGHTER/PARAMEDIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27383283

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID W HARDIN

Mailing Address 4525 321ST ST

City

STACY

State

MN

Zip Code

55079-9212

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27383285

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN C RAYNOR

Mailing Address PO BOX 876095

City

WASILLA

State

AK

Zip Code

99687-6095

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27383327

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ELWELL P LEACH

Mailing Address 7 PLEASANT ST

City

NEWCASTLE

State

ME

Zip Code

04553-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27383412

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR D C WILLIAMS

Mailing Address 4800 SW OLD CLIFTON RD

City

PORT ORCHARD

State

WA

Zip Code

98367-7694

FEC ID number of contributing
federal political committee.

C

Name of Employer

US NAVY DEPT

Occupation

RETIRED - ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27383440

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 269 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STEPHEN E E REMENAR

Mailing Address 1407 GALISTEO ST

City

SANTA FE

State

NM

Zip Code

87505-4666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27383467

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR RALPH E E CROWELL

Mailing Address 381 SATUCKET RD

City

BREWSTER

State

MA

Zip Code

02631-2379

FEC ID number of contributing
federal political committee.

C

Name of Employer
GLINES & RHODES, INC.Occupation
EXECUTIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

Transaction ID: 27383485

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS PRINCE

Mailing Address 2865 COUNTRYLAKE DR

City

CINCINNATI

State

OH

Zip Code

45233-1736

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Transaction ID: 27383507

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT W HILL, JR

Mailing Address 7706 MARVIN HILL RD

City

SPRINGWATER

State

NY

Zip Code

14560-9722

FEC ID number of contributing
federal political committee.

C

Name of Employer
GRAVER TECHNOLOGIES

Occupation

METAL FABRICATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27383511

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR AL DEWLEN

Mailing Address 3024 MAPLE HILL CIR

City

WACO

State

TX

Zip Code

76708-1557

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27383549

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MIKE ROBINSON

Mailing Address PO BOX 46

City

KOOTENAI

State

ID

Zip Code

83840-0046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27383552

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDWARD THRUSTON

Mailing Address PO BOX 16400

City

PENSACOLA

State

FL

Zip Code

32507-6400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27383578

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID WARTHER

Mailing Address 2561 CRESTVIEW DR NW

City

DOVER

State

OH

Zip Code

44622-7405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27383604

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

MR DEAN B BURCH

Mailing Address 294 STATE ROAD 327

City

HUDSON

State

IN

Zip Code

46747-9405

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANGOLA DIE COATING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27383611

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DENNIS A MODLIN

Mailing Address 3664 PLANTATION GRV

City

COLORADO SPGS

State

CO

Zip Code

80920-4833

FEC ID number of contributing
federal political committee.

C

Name of Employer
PDI

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27383613

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM D MASON

Mailing Address 10808 GLENHAVEN WAY

City

RANCHO CORDOVA

State

CA

Zip Code

95670-4947

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27383685

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS S STEELE

Mailing Address 3570 RIDGEWOOD RD

City

SAINT PAUL

State

MN

Zip Code

55112-3648

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPERRY COMPUTER

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27383703

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES K FINK

Mailing Address 2589 SUMAC RDG

City

WHITE BEAR LAKE

State

MN

Zip Code

55110-7004

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

MANUFACTURERS REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27383709

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR CARL W ANDERSON

Mailing Address 2639 BRIGHTON AVE NE

City

MINNEAPOLIS

State

MN

Zip Code

55418-3061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27383716

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR ARLEN VACURA

Mailing Address PO BOX 184

City

GREENBUSH

State

MN

Zip Code

56726-0184

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

VA RETIREMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27383819

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DONALD R BULLION

Mailing Address 110 ORCHARD DR

City

OLD HICKORY

State

TN

Zip Code

37138-3419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27383833

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN THINESEN

Mailing Address 63654 MAPLE HILL LN

City

ASKOV

State

MN

Zip Code

55704-4054

FEC ID number of contributing
federal political committee.

C

Name of Employer
1ST NATL BANK OF ASKOV

Occupation

BANK OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27383845

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MS IDA D DUNBAR

Mailing Address 3025 CHEROKEE RD

City

BIRMINGHAM

State

AL

Zip Code

35223-1311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27383857

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1080.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LARRY E SCHIRMER

Mailing Address 4906 STONER HILL RD

City

DANVILLE

State

NY

Zip Code

14437-9225

FEC ID number of contributing
federal political committee.

C

Name of Employer
WAYLAND POLICE DEPT

Occupation

SECURITY OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27383861

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS CAROLE CRAFT

Mailing Address 4308 NW 42ND TER APT 3

City

OKLAHOMA CITY

State

OK

Zip Code

73112-6321

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27383874

Amount of Each Receipt this Period

85.00

C.

Full Name (Last, First, Middle Initial)

J R KILMER

Mailing Address 1340 AIRLINE DR

City

BOSSIER CITY

State

LA

Zip Code

71112-3002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27383885

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GORDON CRYDERMAN

Mailing Address 10146 HOGAN RD

City

SWARTZ CREEK

State

MI

Zip Code

48473-9119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27383888

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN A TERRY

Mailing Address 5160 202ND LN NE

City

WYOMING

State

MN

Zip Code

55092-8537

FEC ID number of contributing
federal political committee.

C

Name of Employer
W G PEARSON INC

Occupation

OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27383902

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM D ULMAN

Mailing Address 724 PRINCE EDWARD DR

City

HOWELL

State

MI

Zip Code

48843-7839

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27383910

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

1105.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KENNETH D ANDERSON

Mailing Address 615 ELK ST

City

DULUTH

State

MN

Zip Code

55803-1406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27383917

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

MR HERBERT J J BARNHART

Mailing Address 16586 ORIOLE RD

City

SPRING VALLEY

State

MN

Zip Code

55975-4670

FEC ID number of contributing
federal political committee.

C

Name of Employer
IBM

Occupation

DA ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27383921

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

MR ED JUTH

Mailing Address 1671 OAK RIDGE DR

City

CORINTH

State

TX

Zip Code

76210-3044

FEC ID number of contributing
federal political committee.

C

Name of Employer
METRO FIRE INC

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27383923

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 278 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HAROLD H HOUG

Mailing Address 15833 785TH AVE

City

ALBERT LEA

State

MN

Zip Code

56007-7035

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: 27383925

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ANSELM A BORELLA

Mailing Address 194 SMITHTOWN BLVD

City

NESCONSET

State

NY

Zip Code

11767-1859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27383928

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS E E SYMONDS

Mailing Address 10690 W SOUTHERLAND ST

City

BOISE

State

ID

Zip Code

83709-2366

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27383985

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ALLEN G MICKOW

Mailing Address 4035 BAFFIN LN NE

City

ROCHESTER

State

MN

Zip Code

55906-3919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27383999

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES H STROM

Mailing Address 2014 137TH STREET CT S

City

TACOMA

State

WA

Zip Code

98444-1124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27384016

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL ROESLER

Mailing Address 17207 BROADOAK DR

City

TAMPA

State

FL

Zip Code

33647-2793

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27384017

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT L PEZZATI

Mailing Address 14657 MORTENVIEW DR

City

TAYLOR

State

MI

Zip Code

48180-4758

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27384044

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH BUNCH

Mailing Address 4607 N TOM GREEN AVE

City

ODESSA

State

TX

Zip Code

79762-6825

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

180.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27384063

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ROY W W NORTHEY

Mailing Address 3212 FLORINE ST

City

DULUTH

State

MN

Zip Code

55811-2829

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27384068

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PHILIP D BRUST, JR

Mailing Address PO BOX 415

City

JEFFERSON

State

GA

Zip Code

30549

FEC ID number of contributing
federal political committee.

C

Name of Employer
FOOD SERVICE SUPPLY INC.Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27384085

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN R OCONNELL

Mailing Address PO BOX 632

City

NEW YORK

State

NY

Zip Code

10008-0632

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW YORK TELEPHONEOccupation
INSTALLER- RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27384102

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR PHIL KREUTER

Mailing Address 1609 AMBERWOOD DR

City

GOSHEN

State

IN

Zip Code

46526-5533

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	8

Transaction ID: 27384136

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL H MOSCA

Mailing Address PO BOX 758

City

BOWLING GREEN

State

VA

Zip Code

22427-0758

FEC ID number of contributing
federal political committee.

C

Name of Employer
IRS

Occupation

SUPPLY CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.39

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27384140

Amount of Each Receipt this Period

20.42

B.

Full Name (Last, First, Middle Initial)

MR MARTIN BADGLEY

Mailing Address 50 PARADISE DR

City

WATERTOWN

State

SD

Zip Code

57201-5400

FEC ID number of contributing
federal political committee.

C

Name of Employer
DYNAMIE ENGINEERING

Occupation

MACHINIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27384247

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR BRUCE BARKER

Mailing Address 2042 S DOUGLAS AVE

City

SPRINGFIELD

State

IL

Zip Code

62704-3526

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF ILLINOIS

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27384263

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

250.42

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HUGH BOLTON

Mailing Address 8002 NE HIGHWAY 99 # 276

City

VANCOUVER

State

WA

Zip Code

98665-8813

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27384292

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DEAN CROSS

Mailing Address 4414 47TH ST N

City

FARGO

State

ND

Zip Code

58102-6909

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27384327

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR BILL BIGGS

Mailing Address PO BOX 407

City

LINCOLN CITY

State

OR

Zip Code

97367-0407

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27384344

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES CROW

Mailing Address 504 WILLIAMS ST

City

ROCKWALL

State

TX

Zip Code

75087-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROCKWALL ISD

Occupation

DIR OF MAINTENANCE/FACILITIES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27384362

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE B WAGNER, JR

Mailing Address 247 N 2ND ST

City

WILLIAMSBURG

State

OH

Zip Code

45176-1319

FEC ID number of contributing
federal political committee.

C

Name of Employer
CINCINNATI COCA-COLA

Occupation

SERVICE TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27384378

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM H HOLDEN

Mailing Address 10015 FERNDAL RD

City

DALLAS

State

TX

Zip Code

75238-2124

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNITED TILE CO

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27384417

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BILL MOORE

Mailing Address PO BOX 177

City

CHALLENGE

State

CA

Zip Code

95925-0177

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27384440

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR BARRY R SCHAFFER

Mailing Address 10135 86TH AVE NE

City

CALVIN

State

ND

Zip Code

58323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27384450

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DONALD LEHR

Mailing Address 4201 HOBART RD

City

CARSON CITY

State

NV

Zip Code

89703-9497

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27384463

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DENNIS P SHEA

Mailing Address 6561 TARAWE DRIVE

City

SARASOTA

State

FL

Zip Code

34241-5645

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27384485

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR GUY W MOSS

Mailing Address PO BOX 331

City

ZEPHYR COVE

State

NV

Zip Code

89448-0331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: 27384490

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES R SCHOENBAUM

Mailing Address 2095 POLY DR

City

BILLINGS

State

MT

Zip Code

59102-1653

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27384520

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROSS C MADSEN

Mailing Address 5240 E TURNER AVE

City

FRESNO

State

CA

Zip Code

93727-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27384543

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MR STUART S WRIGHT

Mailing Address PO BOX 684808

City

AUSTIN

State

TX

Zip Code

78768-4808

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27384561

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM A A CHRISTIANS

Mailing Address 617 CHRISTIANS LANE

City

DENTON

State

MT

Zip Code

59430-9423

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27384602

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM A A CHRISTIANS

Mailing Address 617 CHRISTIANS LANE

City

DENTON

State

MT

Zip Code

59430-9423

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27384603

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JOSEPH S RICE

Mailing Address 909 W CENTRAL AVE APT 612

City

MISSOULA

State

MT

Zip Code

59801-7956

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27384613

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS BORISKI

Mailing Address 41-371 BALACLAVA DR

City

BERMUDA DUNES

State

CA

Zip Code

92203-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27384643

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KELLY J COZBY

Mailing Address PO BOX 870643

City

WASILLA

State

AK

Zip Code

99687-0643

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27384676

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MARK W W SEDERQUIST

Mailing Address PO BOX 577

City

BAGLEY

State

MN

Zip Code

56621-0577

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27384717

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR W KUZEMCHOCK

Mailing Address PO BOX 175

City

FRENCHVILLE

State

PA

Zip Code

16836-0175

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMMONWEALTH OF PENNSYLVANIA

Occupation

CONSERVATION INSPECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Transaction ID: 27384769

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD D GROSSMAN

Mailing Address 6835 TIERRA LINDA ST

City

PORT RICHEY

State

FL

Zip Code

34668-3893

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27384772

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

MR LEONARD G G JENKINS

Mailing Address 13 BERMUDA DUNES CT

City

FRISCO

State

TX

Zip Code

75034-6827

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27384781

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR BOBBY W CLARK

Mailing Address 8048 S. FM 898

City

WHITEWRIGHT

State

TX

Zip Code

75491-7856

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27384789

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD E MEREDITH

Mailing Address 7087 WYERS POINT RD

City

OVID

State

NY

Zip Code

14521-9598

FEC ID number of contributing
federal political committee.

C

Name of Employer

DELPHI AUTOMATIVE SYTEMS

Occupation

MOLD MAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27384793

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR LARRY G NELSON

Mailing Address 1923 100TH AVE

City

DRESSER

State

WI

Zip Code

54009-4438

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27384795

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID DREXLER

Mailing Address D2798 DAY AVE

City

MARSHFIELD

State

WI

Zip Code

54449-9226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27384800

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JERRY W BROOKS

Mailing Address 11700 GLEN ARBOR TER

City

KANSAS CITY

State

MO

Zip Code

64114-5559

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED - ELECTRICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27384813

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ERASMO E TAPIA

Mailing Address 1806 W 3RD ST

City

COAL VALLEY

State

IL

Zip Code

61240-9338

FEC ID number of contributing
federal political committee.

C

Name of Employer
MILLER CONTAINER CORP

Occupation

3RD ASST. MACHINE OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27384816

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR ANTHONY CHIER

Mailing Address W1207 W FOREST RIDGE RD

City

BERLIN

State

WI

Zip Code

54923-9414

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27384883

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

520.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STANLEY C RECH

Mailing Address 1602 INDIAN TRL

City

ROWLETT

State

TX

Zip Code

75088-1597

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27384890

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD A A JOLLEY, SR

Mailing Address 133 LAKE SHORE DR

City

SCROGGINS

State

TX

Zip Code

75480-5619

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY

Occupation

ELECTRONIC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27384904

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN SHIVERS

Mailing Address PO BOX 962020

City

FORT WORTH

State

TX

Zip Code

76162-2020

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTHWEST BANK

Occupation

CEO - BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27384919

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RUSSELL WHITLEY

Mailing Address 7527 ALDERLY DR

City

SPRING

State

TX

Zip Code

77389-3445

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27384953

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS MAXINE G KEMBLE

Mailing Address PO BOX 62114

City

SAN ANGELO

State

TX

Zip Code

76906-2114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27384957

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR RAY MURPHY

Mailing Address PO BOX 192

City

WALTON

State

NY

Zip Code

13856-0192

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27384973

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BRIAN J COLE

Mailing Address 383 8TH ST

City

CEDAR SPRINGS

State

MI

Zip Code

49319-9484

FEC ID number of contributing
federal political committee.

C

Name of Employer

WOLVERINE WORLD WIDE, INC.

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27384977

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE H GODWIN

Mailing Address 7171 BUFFALO SPEEDWAY APT 2011

City

HOUSTON

State

TX

Zip Code

77025-1437

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27384980

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DENNIS W SHAW

Mailing Address 1558 FERRELL RD

City

MULLICA HILL

State

NJ

Zip Code

08062-3729

FEC ID number of contributing
federal political committee.

C

Name of Employer

MARTELL CONSTRUCTION CO

Occupation

CONTROLLER RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27385021

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

LYNN H METCALF

Mailing Address 778 COUNTY ROAD 266

City

BECKVILLE

State

TX

Zip Code

75631-6881

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27385065

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

MR MALCOLM P P CLARK

Mailing Address 4521 NEIBAUER RD

City

BILLINGS

State

MT

Zip Code

59106-3821

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27385126

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR BEN R BROWN

Mailing Address 204 REDBUD ST

City

ARGYLE

State

TX

Zip Code

76226-3521

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27385130

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 297 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD SHEARMAN

Mailing Address 7693 165TH ST W

City

LAKEVILLE

State

MN

Zip Code

55044-6224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27385134

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES W WILLIAMS

Mailing Address 3970 HIGHWAY 12 N

City

ASHLAND CITY

State

TN

Zip Code

37015-6137

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27385188

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL DE MARIA

Mailing Address 2404 VARNER RD

City

GREENSBORO

State

NC

Zip Code

27406-9217

FEC ID number of contributing
federal political committee.

C

Name of Employer
BLUE RIDGE DRILLING

Occupation
OWNER - PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27385202

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 298 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KENT BOLERJACK

Mailing Address 811 S 32ND ST

City

TERRE HAUTE

State

IN

Zip Code

47803-2833

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

COMMERCIAL PHOTOGRPH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27385205

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR DOUGLAS PETERSON

Mailing Address PO BOX 224

City

CLARKS

State

NE

Zip Code

68628-0224

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27385252

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR ANTHONY N COX

Mailing Address 2613 PRAIRIE AVE

City

PASADENA

State

TX

Zip Code

77506-5224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27385270

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

485.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 299 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICK NORWOOD

Mailing Address 5535 CHARLOTTE LN

City

RIVERSIDE

State

CA

Zip Code

92509-3816

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27385274

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN T BARRETT, JR

Mailing Address 2909 GLENVIEW AVE

City

AUSTIN

State

TX

Zip Code

78703-1959

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27385295

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR BILL SAVELL

Mailing Address PO BOX 961

City

SONORA

State

TX

Zip Code

76950-0961

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27385299

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAMR PRIVETTE

Mailing Address 23273 THORNHILL RD

City

BUSH

State

LA

Zip Code

70431-2553

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27385336

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL L SONNTAG

Mailing Address PO BOX 425

City

SHERIDAN

State

TX

Zip Code

77475-0425

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27385338

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR L S BROWN, JR

Mailing Address PO BOX 430

City

COMFORT

State

TX

Zip Code

78013-0430

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 1 / 2 0 0 8

Transaction ID: 27385373

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 301 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PAUL L BURNSIDE, JR

Mailing Address PO BOX 14

City

FAYETTEVILL

State

TX

Zip Code

78940-0014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27385382

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT G BETTERTON

Mailing Address 2208 S COUNTY ROAD 1040

City

STANTON

State

TX

Zip Code

79782-9303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27385384

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM WARD

Mailing Address 1415 E CARSON ST APT 6

City

CARSON

State

CA

Zip Code

90745-2372

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27385396

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 302 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOE YAO

Mailing Address 526 CHICKASAWBA ST

City

BLYTHEVILLE

State

AR

Zip Code

72315-2722

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

BUSINESS OWNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27385400

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR HERBERT A POTTS

Mailing Address 12610 GOOCH HILL RD

City

GALLATIN GATEWAY

State

MT

Zip Code

59730-9776

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27385424

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR SAMUEL R QUINCEY

Mailing Address 705 OAKHILL DR

City

KILLEEN

State

TX

Zip Code

76541-7284

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

343.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

Transaction ID: 27385440

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 303 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR SAMUEL R QUINCEY

Mailing Address 705 OAKHILL DR

City

KILLEEN

State

TX

Zip Code

76541-7284

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27385442

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ROY CARSON

Mailing Address 2570 FIRE HILL RD

City

WALTERBORO

State

SC

Zip Code

29488-8755

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27385474

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH BUNCH

Mailing Address 4607 N TOM GREEN AVE

City

ODESSA

State

TX

Zip Code

79762-6825

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27394150

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 304 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD E E JONES

Mailing Address PO BOX 427

City

SILSBEE

State

TX

Zip Code

77656-0427

FEC ID number of contributing
federal political committee.

C

Name of Employer
JONES ABBEY CARPET

Occupation

FLOORING DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27394182

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR PAUL E SCHROEDER

Mailing Address 115 LARIMORE ST

City

VICTORIA

State

TX

Zip Code

77904-1806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27394227

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR ALFRED H CHENOWETH

Mailing Address 1715 DRIFTWOOD DR

City

SEGUIN

State

TX

Zip Code

78155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27394262

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 305 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL WALSH

Mailing Address 300 FALLING ROCK DR

City

STUARTS DRAFT

State

VA

Zip Code

24477-2930

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN SAFETY RAZOR

Occupation

TOOL MAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27394295

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL WALSH

Mailing Address 300 FALLING ROCK DR

City

STUARTS DRAFT

State

VA

Zip Code

24477-2930

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN SAFETY RAZOR

Occupation

TOOL MAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27394300

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MS ANN M VUINI

Mailing Address 12150 STILL MEADOW DR

City

CLERMONT

State

FL

Zip Code

34711-6649

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27394341

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 306 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILBUR N N GEORGE

Mailing Address PO BOX 114

City

FISCHER

State

TX

Zip Code

78623-0114

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

CONTRACTOR/RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27394398

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR LOUIS E WALKER, JR

Mailing Address 732 AMELIA AVE

City

BROWNSVILLE

State

OR

Zip Code

97327-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27394435

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR LOUIS E WALKER, JR

Mailing Address 732 AMELIA AVE

City

BROWNSVILLE

State

OR

Zip Code

97327-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27394437

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LOUIS E WALKER, JR

Mailing Address 732 AMELIA AVE

City

BROWNSVILLE

State

OR

Zip Code

97327-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27394439

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR DOUG HILL

Mailing Address 3208 HIGHWAY 71

City

LOCKESBURG

State

AR

Zip Code

71846-9641

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27394487

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN RUTHERFORD

Mailing Address 802 S BAGLEY CREEK RD

City

PORT ANGELES

State

WA

Zip Code

98362-9234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27394495

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DENNIS S AUBUCHON

Mailing Address 207 WELLESLEY DR

City

O FALLON

State

IL

Zip Code

62269-2651

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27394504

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JOHNNY W GRIFFIN

Mailing Address PO BOX 1612

City

STILLWATER

State

OK

Zip Code

74076-1612

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27394522

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM D JONES

Mailing Address 855 EBENEZER RD

City

KNOXVILLE

State

TN

Zip Code

37923-5907

FEC ID number of contributing
federal political committee.

C

Name of Employer
METRO MANAGEMENT

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27394533

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT A AQUIST

Mailing Address 9567 MEADOW LN

City

JUNEAU

State

AK

Zip Code

99801-9376

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY BOROUGH OF JUNEAU

Occupation

CONTRACTS OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27394537

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID V JUAREZ

Mailing Address 4636 TONY LEMA LN

City

VIRGINIA BCH

State

VA

Zip Code

23462-4638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27394547

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR DONALD K JUDD

Mailing Address 2818 W DENGAR AVE

City

MIDLAND

State

TX

Zip Code

79705-6103

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27394571

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STEVEN C C SCHREINER

Mailing Address 4935 S GRANT ST

City

ENGLEWOOD

State

CO

Zip Code

80113-6846

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27394607

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR HUGH W CALVERT

Mailing Address 3821 N 7TH CT APT C

City

MCALLEN

State

TX

Zip Code

78501-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27394638

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR FREDERICK E KRAUS

Mailing Address 711 W MAIN ST

City

FREDERICKSBURG

State

TX

Zip Code

78624-3133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27394645

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LAWTON H HUTCHISON

Mailing Address PO BOX 5307

City

GRANBURY

State

TX

Zip Code

76049-0307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: 27394678

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

DR RUSSELL L TURNER

Mailing Address 600 MURR RD

City

AZLE

State

TX

Zip Code

76020-1310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

PHYSICIAN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27394727

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR BOBBY J LANDERS

Mailing Address 803 W 7TH ST

City

MULESHOE

State

TX

Zip Code

79347-4511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27394734

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROY DEUPREE

Mailing Address 2605 SE 19TH AVE

City

AMARILLO

State

TX

Zip Code

79103-4107

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY OF AMARILLO

Occupation

MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27394751

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

P L LEEWRIGHT

Mailing Address HC 1 BOX 45

City

BORGER

State

TX

Zip Code

79007-9706

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27394770

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)

MR ROSCOE C FIELDS

Mailing Address 1205 W 25TH TER S

City

INDEPENDENCE

State

MO

Zip Code

64052-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED-SMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 27394813

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROSCOE C FIELDS

Mailing Address 1205 W 25TH TER S

City

INDEPENDENCE

State

MO

Zip Code

64052-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED-SMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27394817

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR ROSCOE C FIELDS

Mailing Address 1205 W 25TH TER S

City

INDEPENDENCE

State

MO

Zip Code

64052-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation

RETIRED-SMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27394818

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR BRENT T LOCKWOOD

Mailing Address 7506 URAY DR

City

AUSTIN

State

TX

Zip Code

78724-3351

FEC ID number of contributing
federal political committee.

C

Name of Employer
TANDEM COMPUTERS

Occupation

ELECTRONIC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.08

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27394820

Amount of Each Receipt this Period

345.00

SUBTOTAL of Receipts This Page (optional)

395.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BRENT T LOCKWOOD

Mailing Address 7506 URAY DR

City

AUSTIN

State

TX

Zip Code

78724-3351

FEC ID number of contributing
federal political committee.

C

Name of Employer
TANDEM COMPUTERS

Occupation

ELECTRONIC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.08

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 8

Transaction ID: 27394822

Amount of Each Receipt this Period

30.42

B.

Full Name (Last, First, Middle Initial)

MR FRED M GRUNDON

Mailing Address PO BOX 128

City

MOUNT CARMEL

State

IL

Zip Code

62863-0128

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27394827

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR MONTY HARKINS

Mailing Address PO BOX 40

City

SANDERSON

State

TX

Zip Code

79848-0040

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27394847

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

280.42

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MONTY HARKINS

Mailing Address PO BOX 40

City

SANDERSON

State

TX

Zip Code

79848-0040

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27394848

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR BENJAMIN B BOYCE

Mailing Address 1005 WILDWOOD DR

City

BRIGHAM CITY

State

UT

Zip Code

84302-3039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27394862

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR SHANE P FLYNN

Mailing Address 433 N KLUEMPER RD

City

JASPER

State

IN

Zip Code

47546-9119

FEC ID number of contributing
federal political committee.

C

Name of Employer
KIMBALL INT'L

Occupation

OFFICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27394872

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LEWIS S SINGLETARY

Mailing Address 3319 EVERGREEN DR

City

LAKE PARK

State

GA

Zip Code

31636-4601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27394892

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR R D HUFSTADER

Mailing Address 4780 SADDLEHORN TRL

City

MIDDLEBURG

State

FL

Zip Code

32068-3278

FEC ID number of contributing
federal political committee.

C

Name of Employer
US NAVY

Occupation
PHYCISIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27394902

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR CARL G REED

Mailing Address 4808 15TH ST

City

LUBBOCK

State

TX

Zip Code

79416-5618

FEC ID number of contributing
federal political committee.

C

Name of Employer
US POSTAL SERVICE

Occupation
POSTMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27394907

Amount of Each Receipt this Period

52.00

SUBTOTAL of Receipts This Page (optional)

152.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MATTHIAS E BACHMAN

Mailing Address PO BOX 493

City

MIDLAND

State

TX

Zip Code

79702-0493

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
GEOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27394912

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS V JARDEE

Mailing Address 8257 S SICILY CT

City

AURORA

State

CO

Zip Code

80016-7197

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED - MINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27395004

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR RAYMOND P P HENKEL

Mailing Address 4092 S WABASH ST

City

DENVER

State

CO

Zip Code

80237-1755

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27395008

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID H HEBB

Mailing Address 1004 W WESTOVER RD

City

SPOKANE

State

WA

Zip Code

99218-2468

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27395025

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH STUDEMAN

Mailing Address 65523 N CENTERVILLE RD

City

STURGIS

State

MI

Zip Code

49091-9148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27395037

Amount of Each Receipt this Period

675.00

C.

Full Name (Last, First, Middle Initial)

MS DEBORAH C EGENDER

Mailing Address 17023 E DORADO DR

City

CENTENNIAL

State

CO

Zip Code

80015-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer
MONTGOMERY LITTLE &

Occupation
ACCOUNTANT/HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27395045

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

820.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 319 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MS RHODA LONG

Mailing Address 232 MARILYN ST

City

ROSEBURG

State

OR

Zip Code

97470-9412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27395051

Amount of Each Receipt this Period

80.00

B.

Full Name (Last, First, Middle Initial)

MS RHODA LONG

Mailing Address 232 MARILYN ST

City

ROSEBURG

State

OR

Zip Code

97470-9412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27395054

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT A LEECH

Mailing Address 210 IRVING ST

City

DENVER

State

CO

Zip Code

80219-1426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27395062

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 320 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT P KITCHELL

Mailing Address 412 TERRY POINT DR

City

FORT COLLINS

State

CO

Zip Code

80524-1359

FEC ID number of contributing
federal political committee.

C

Name of Employer
KITCHELL ENGINEERING, LLC

Occupation

CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27395072

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR GORDON WILLINGHAM

Mailing Address 3610 MARY LOU ST

City

PAHRUMP

State

NV

Zip Code

89061-7957

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27395118

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT L ELDER

Mailing Address 310 W 8TH ST

City

LEADVILLE

State

CO

Zip Code

80461-3532

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEADVILLE SILVER & GOLD
INC

Occupation

MINING ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27395133

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 321 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBT E BROCKMANN

Mailing Address 624 COUNTRY CLUB DR

City

MONROE

State

GA

Zip Code

30655-2276

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27395193

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR JOE CAPPEL

Mailing Address 3801 BELLAIRE CIR

City

FORT WORTH

State

TX

Zip Code

76109-2745

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27395207

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR HARVEY PLESS

Mailing Address 1954 29TH AVE

City

GREELEY

State

CO

Zip Code

80634-5752

FEC ID number of contributing
federal political committee.

C

Name of Employer
GRANT NORPAC

Occupation

SEISMIC OBSERVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27395217

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 322 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TONY CARPINO

Mailing Address 16420 GINGERWOOD CT

City

GAINESVILLE

State

VA

Zip Code

20155-1944

FEC ID number of contributing
federal political committee.

C

Name of Employer
IBM

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27395262

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS D VOSS

Mailing Address 49441 344TH STREET

City

WINDOM

State

MN

Zip Code

56101-3408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
SHIPPING FOREMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27395287

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR R P MUNDELL

Mailing Address 149 JOHNSON LN

City

READING

State

PA

Zip Code

19605-9323

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27395315

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHARLES JACOB

Mailing Address PO BOX 426

City

ROCKY FORD

State

CO

Zip Code

81067-0426

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF COLORADOOccupation
CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: 27395351

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR MATHEW J RENO

Mailing Address PO BOX 399

City

GILLETTE

State

WY

Zip Code

82717

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLOYD C RENO & SONS INCOccupation
RANCH MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2162.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27395382

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

MR GARY M KRIZAN

Mailing Address 1123 REINOEHL ST

City

LEBANON

State

PA

Zip Code

17046-2842

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27395390

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

495.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DANIEL C YOUNG

Mailing Address 190 SWEETWATER DR

City

FAYETTEVILLE

State

GA

Zip Code

30214-1098

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27395456

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MR KYLE W W COX

Mailing Address 4698 TEALTOWN RD

City

MILFORD

State

OH

Zip Code

45150-9730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27395460

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE W MEADORS

Mailing Address 34790 E US HIGHWAY 50

City

PUEBLO

State

CO

Zip Code

81006-9412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27395468

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 325 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BILL CAMPBELL

Mailing Address 1066 ALTA VISTA DR

City

LARAMIE

State

WY

Zip Code

82072-5004

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMOCO PROD CO

Occupation

D FOREMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27395510

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR SHELDON BARROQUILLO

Mailing Address 3320 RIVERVIEW DRIVE SW

City

MOORE HAVEN

State

FL

Zip Code

33471-8224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

Transaction ID: 27395574

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD H H MURRY

Mailing Address PO BOX 1813

City

LAKE ARROWHEAD

State

CA

Zip Code

92352-1813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27395593

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 326 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS C PIPER

Mailing Address 1704 RAINIER ST

City

IDAHO FALLS

State

ID

Zip Code

83402-2533

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27395622

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS C PIPER

Mailing Address 1704 RAINIER ST

City

IDAHO FALLS

State

ID

Zip Code

83402-2533

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27395624

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MARION GROOTHUIS

Mailing Address 3490 N SADDLEMAN PL

City

EAGLE

State

ID

Zip Code

83616-2930

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Transaction ID: 27395645

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LEROY BRICKMAN

Mailing Address RR 2 BOX 170

City

OKEENE

State

OK

Zip Code

73763-9427

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

FARMER / RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27395658

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR TED C REISIG

Mailing Address PO BOX 835

City

SHATTUCK

State

OK

Zip Code

73858-0835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Transaction ID: 27395718

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM WALKER

Mailing Address 1270 LOWER WELLS BENCH RD

City

OROFINO

State

ID

Zip Code

83544-9540

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27395744

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL LANG

Mailing Address 550 SW FERNWOOD ST

City

ISSAQUAH

State

WA

Zip Code

98027-4513

FEC ID number of contributing
federal political committee.

C

Name of Employer
IBM

Occupation

EDUCATION PRODUCT MGR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27395749

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR QUENTIN BRITE

Mailing Address 612 LITTLE CREEK RD

City

CAWOOD

State

KY

Zip Code

40815-5247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27395788

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES D LEGER, II

Mailing Address PO BOX 848

City

MAURICEVILLE

State

TX

Zip Code

77626-0848

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27395801

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 329 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LYNN W DAVIS

Mailing Address 3043 N 750 E

City

PROVO

State

UT

Zip Code

84604-4205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27395827

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR LYNN W DAVIS

Mailing Address 3043 N 750 E

City

PROVO

State

UT

Zip Code

84604-4205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27395829

Amount of Each Receipt this Period

1200.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT F RUSK

Mailing Address 221 BENT OAK RD

City

WEATHERFORD

State

TX

Zip Code

76086-2729

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27395860

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STEPHEN F SALATHIEL

Mailing Address PO BOX 211953

City

BEDFORD

State

TX

Zip Code

76095-8953

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27395875

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR STEVEN B REIS

Mailing Address PO BOX 821002

City

VANCOUVER

State

WA

Zip Code

98682-0023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27395880

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR BUD HORTON

Mailing Address PO BOX 1852

City

GEORGE WEST

State

TX

Zip Code

78022-1852

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27395902

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PAUL W CHITTUM

Mailing Address 826 DUTCH HOLLOW RD

City

RAPHINE

State

VA

Zip Code

24472-2006

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

SALES & SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27395906

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DOUGLAS D D COCHERELL

Mailing Address 3544 QUINCY AVE

City

OGDEN

State

UT

Zip Code

84403-1137

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27395918

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR SYLVESTER RIEMANN

Mailing Address 4110 BIRDIE CT

City

MISSOULA

State

MT

Zip Code

59803-9753

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27395958

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR SYLVESTER RIEMANN

Mailing Address 4110 BIRDIE CT

City

MISSOULA

State

MT

Zip Code

59803-9753

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27395960

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

REDGE D JENSEN

Mailing Address PO BOX 789

City

GUNNISON

State

UT

Zip Code

84634-0789

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27395976

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR ROD SCHWARTZ

Mailing Address 5970 W ORCHID LN

City

CHANDLER

State

AZ

Zip Code

85226-1223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27395996

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

595.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES A GRABOWSKI

Mailing Address 900 N ROHLWING RD APT 102

City

ADDISON

State

IL

Zip Code

60101-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer
ZURICH LIFE

Occupation

COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27396018

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ED MAHRS

Mailing Address PO BOX 10154

City

GREENSBORO

State

NC

Zip Code

27404-0154

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27396036

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR VERNON D STIEGLER

Mailing Address 3117 CAPTAINS LN

City

LONGMONT

State

CO

Zip Code

80503-7891

FEC ID number of contributing
federal political committee.

C

Name of Employer
HEWLETT PACKARD

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27396038

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT MCCOLLUM

Mailing Address 205 BANGOR JUNCTION RD

City

BANGOR

State

PA

Zip Code

18013-9318

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27396044

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR PATRICK J HONAN

Mailing Address 38 CLEMATIS ST

City

ROCHESTER

State

NY

Zip Code

14612-2033

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27396046

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN C KONTES

Mailing Address 1254 WILLARD AVE

City

POCATELLO

State

ID

Zip Code

83201-3541

FEC ID number of contributing
federal political committee.

C

Name of Employer
WESTINGHOUSE

Occupation

PIPE FITTER & CUSTOM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27396074

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TOMMY SAYLOR

Mailing Address 123 ASTON DR

City

BRIDGEPORT

State

TX

Zip Code

76426-6003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27396075

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR MELVIN R MILLER

Mailing Address 840 AVENUE K

City

ELY

State

NV

Zip Code

89301-2711

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27396118

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR J D GRAHAM

Mailing Address 85 HATHAWAY ROAD

City

GOSHEN

State

VT

Zip Code

05733-8436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27396136

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR EMERALD J HUTCHINS

Mailing Address PO BOX 463

City State Zip Code
WEIPPE ID 83553-0463

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27396148

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)
MR DAVID HENSLEY

Mailing Address 414 STARDUST DR

City State Zip Code
PLACENTIA CA 92870-4919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27396164

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)
MS LOIS H MILLER

Mailing Address 320 S ILLINOIS ST

City State Zip Code
CONRAD MT 59425-1907

FEC ID number of contributing
federal political committee.

C

Name of Employer
HAWLEY-DESIMON, INC.

Occupation
SEC-TREAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27396172

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ERNEST J J APODACA

Mailing Address 13429 N VISTA DEL ORO

City

SCOTTSDALE

State

AZ

Zip Code

85264-9619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27396226

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL D ROBERTS

Mailing Address 1200 EAGLE WAY

City

ROCK SPRINGS

State

WY

Zip Code

82901-3466

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED ENGINEER

Occupation

OIL&GAS CONSTRUCTION/DRILLING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27396265

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR CARL KERSHING

Mailing Address 305 CORRAL DE TIERRA RD

City

SALINAS

State

CA

Zip Code

93908-8917

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED 1983

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27396289

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GARY P RANKIN

Mailing Address 4725 CARROLL LN

City

CORPUS CHRISTI

State

TX

Zip Code

78415-2638

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

CLUB OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27396332

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR WALTER H SMITH

Mailing Address 1310 DEMERSE AVE

City

PRESCOTT

State

AZ

Zip Code

86301-1546

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27396339

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR E SATTERFIELD

Mailing Address 14123 GRAMATAN AVE

City

CLEVELAND

State

OH

Zip Code

44111-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27396392

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR DALE F WEBB

Mailing Address 2300 W CHICO LN

City

YUMA

State

AZ

Zip Code

85365-3804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27396420

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR TONY M M COX

Mailing Address 601 W 81ST ST

City

ODESSA

State

TX

Zip Code

79764-1903

FEC ID number of contributing
federal political committee.

C

Name of Employer

EXXON MOBILE

Occupation

OIL FIELD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27396422

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

R L L BOATWRIGHT

Mailing Address 26582 S COOPERS HAWK RD

City

AMADO

State

AZ

Zip Code

85645-9565

FEC ID number of contributing
federal political committee.

C

Name of Employer

SAN XAVIER BOOK & MATERIA-
LS

Occupation

TEAMSTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27396443

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MIKE M SCHRAEDER

Mailing Address RR 1 BOX 31E

City

JETMORE

State

KS

Zip Code

67854-9768

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

FARMER/RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27396446

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD A A STREATER

Mailing Address 108 PASPEHEGHE RUN

City

YORKTOWN

State

VA

Zip Code

23693-2714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.05

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27396465

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR ALAN GEMSON

Mailing Address 6155 E ADOBE PL

City

TUCSON

State

AZ

Zip Code

85712-3002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED SYSTEMS ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27396497

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR JOE H TUBB

Mailing Address 702 SUNSET DR

City

ESPANOLA

State

NM

Zip Code

87532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED - DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27396523

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR J W W MILLER

Mailing Address PO BOX 3041

City

INCLINE VILLAGE

State

NV

Zip Code

89450-3041

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF CALIF

Occupation

MANAGER - RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27396564

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR FREDERICK R ZIVNUSKA

Mailing Address 4 CRICKLEWOOD PL

City

SAINT LOUIS

State

MO

Zip Code

63131-3311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27396603

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FREDERICK R ZIVNUSKA

Mailing Address 4 CRICKLEWOOD PL

City

SAINT LOUIS

State

MO

Zip Code

63131-3311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27396605

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN G FINIELLO

Mailing Address 1409 FLORIDA ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87110-6805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27396621

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES L BOYKIN

Mailing Address 2390 ROSEDALE DR

City

LAS CRUCES

State

NM

Zip Code

88005-1448

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27396630

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

1135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR CHARLES H SLOOP

Mailing Address 1805 FAIRFAX AVE

City

METAIRIE

State

LA

Zip Code

70003-4041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

798.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27396639

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR STANLEY M KOMPST

Mailing Address 5500 BIG SKY LN

City

LAS VEGAS

State

NV

Zip Code

89149-6630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27396654

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR LAWSON W JACOBS

Mailing Address 308 S FLINT ST

City

BRECKENRIDGE

State

TX

Zip Code

76424-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27396656

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 344 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LAWSON W JACOBS

Mailing Address 308 S FLINT ST

City

BRECKENRIDGE

State

TX

Zip Code

76424-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	8

Transaction ID: 27396657

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

W S STUESSY

Mailing Address 123 NORTHWOOD CIR

City

HARVEST

State

AL

Zip Code

35749-9741

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	8

Transaction ID: 27396679

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR EDWARD A MOYA

Mailing Address PO BOX 402

City

SAINT MARIES

State

ID

Zip Code

83861-0402

FEC ID number of contributing
federal political committee.

C

Name of Employer
SO CAL EDISON

Occupation

ELECTRICIAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27396719

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RAYMOND A OSTRENGA

Mailing Address 4516 JASPER CT

City

LAS CRUCES

State

NM

Zip Code

88012-0673

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIV OF CALIFORNIA

Occupation

MACHINIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27396733

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID W HINMAN

Mailing Address 6500 S GATOR CREEK BLVD

City

SARASOTA

State

FL

Zip Code

34241-9719

FEC ID number of contributing
federal political committee.

C

Name of Employer
FOREST PRODUCTS SUPPLY INC

Occupation

EXECUTIVE & OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27396761

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL E JACKSON

Mailing Address 917 MARINA DR

City

PANAMA CITY

State

FL

Zip Code

32407-5523

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27396781

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MONTE MARSHALL

Mailing Address PO BOX 999

City

DELANO

State

CA

Zip Code

93216-0999

FEC ID number of contributing
federal political committee.

C

Name of Employer
TARGET CORP

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27396783

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM WARNEKE

Mailing Address 6987 S POPLAR WAY

City

CENTENNIAL

State

CO

Zip Code

80112-1139

FEC ID number of contributing
federal political committee.

C

Name of Employer
WARNEKE PAPER CO

Occupation

SALESMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27396802

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR EUGENE D D LEE

Mailing Address 1445 PARK VIEW LN APT 301

City

PORT ANGELES

State

WA

Zip Code

98363-5538

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27396807

Amount of Each Receipt this Period

130.00

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

W W W CHANDLER

Mailing Address 18216 NE KNOB HILL RD

City

YACOLT

State

WA

Zip Code

98675-4111

FEC ID number of contributing
federal political committee.

C

Name of Employer
USDA FOREST SERVICE

Occupation
FORESTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27396822

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR ARTHUR R EVANS

Mailing Address 150 HIGH RD

City

NEWBURY

State

MA

Zip Code

01951-1729

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27396832

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS JO A YOUNG

Mailing Address PO BOX 102

City

TYRONE

State

NM

Zip Code

88065-0102

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27396847

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM S CASSEL

Mailing Address 7501 N NEBO RD

City

MUNCIE

State

IN

Zip Code

47304-9068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27396879

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ROLAND J SALERNO

Mailing Address 177 HICKORY HILL RD

City

NEW BRITAIN

State

CT

Zip Code

06052-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27396891

Amount of Each Receipt this Period

170.00

C.

Full Name (Last, First, Middle Initial)

MR ROLAND J SALERNO

Mailing Address 177 HICKORY HILL RD

City

NEW BRITAIN

State

CT

Zip Code

06052-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27396893

Amount of Each Receipt this Period

170.00

SUBTOTAL of Receipts This Page (optional)

440.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 349 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT HENDERSON

Mailing Address 4608 SLICE CT

City

COLLEGE STATION

State

TX

Zip Code

77845-8998

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27396901

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID L PAULITSCH

Mailing Address 18438 MUNN RD

City

CHAGRIN FALLS

State

OH

Zip Code

44023-6158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27396908

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES GORTNEY

Mailing Address 502 RATCLIFF DR

City

NEW BOSTON

State

TX

Zip Code

75570-2217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
ENGINEER TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27396933

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

415.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 350 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

J E SOMERS

Mailing Address 102 PHILLIPS LN

City

OAK RIDGE

State

TN

Zip Code

37830-7517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27397002

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR HOMER D LEWIS

Mailing Address 529 PAIGE LOOP

City

LOS ALAMOS

State

NM

Zip Code

87544-3622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

Transaction ID: 27397055

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR GENE DAY, II

Mailing Address 4017 88TH ST

City

LUBBOCK

State

TX

Zip Code

79423-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27397078

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

305.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

TERRY E REHFELDT

Mailing Address 1011 CIMARRON CIR

City

BRADENTON

State

FL

Zip Code

34209-1141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27397092

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR PETER F HUMM

Mailing Address PO BOX 1377

City

MOUNTAIN HOME

State

ID

Zip Code

83647-1377

FEC ID number of contributing
federal political committee.

C

Name of Employer
US BUREAU OF LAND MANAGEM-
ENT

Occupation

US CIVIL SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27397114

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR DEWEY E BORN

Mailing Address 4800 N MINER RD

City

PRESCOTT VALLEY

State

AZ

Zip Code

86314-6109

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27397118

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CARL EARN

Mailing Address 35 HANG DOG LN

City

WETHERSFIELD

State

CT

Zip Code

06109-4135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27397122

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR MICKEY R BALLARD

Mailing Address 9630 N 4000 RD

City

DEWEY

State

OK

Zip Code

74029-4111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27397179

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS BULGER

Mailing Address 763 MEEKER AVE

City

BROOKLYN

State

NY

Zip Code

11222-4505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27397187

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS BULGER

Mailing Address 763 MEEKER AVE

City

BROOKLYN

State

NY

Zip Code

11222-4505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27397191

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN F OTTE

Mailing Address 127 DOHM AVE

City

GUILFORD

State

CT

Zip Code

06437-2121

FEC ID number of contributing
federal political committee.

C

Name of Employer

LONDON LUMBER, MADISON CT.

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27397199

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM SHIELDS

Mailing Address 336 CEDAR LN

City

NEW CANAAN

State

CT

Zip Code

06840-5120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27397220

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WAYNE W DENGLER

Mailing Address 26 BRIARWOOD DR

City

DANBURY

State

CT

Zip Code

06810-7002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27397254

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR HUGH QUILEY, JR

Mailing Address 32 SCOTT RD

City

GREENWICH

State

CT

Zip Code

06831-2833

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27397260

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

DR RICHARD J LOVAS

Mailing Address 2844 MONTMART DR

City

ORLANDO

State

FL

Zip Code

32812-1030

FEC ID number of contributing
federal political committee.

C

Name of Employer

MD ANDERSON CANCER CENTER

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27397278

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ALAN VAN EES

Mailing Address 435 E 79TH ST

City

NEW YORK

State

NY

Zip Code

10021-1034

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW YORK STATE COURTS

Occupation

PEACE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27397289

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR CLYDE A JUSTMAN

Mailing Address 1610 S 108TH ST

City

OMAHA

State

NE

Zip Code

68144-1808

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

BRUSH MFG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27397304

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR DONALD SWEET

Mailing Address 18475 SE 21ST ST

City

SILVER SPRINGS

State

FL

Zip Code

34488-6518

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27397306

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 356 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ARTHUR D WEEKS

Mailing Address 11 CANOPUS HOLLOW RD

City

PUTNAM VALLEY

State

NY

Zip Code

10579-1804

FEC ID number of contributing
federal political committee.

C

Name of Employer

ARTHUR WEEKS & SONS, INC.

Occupation

OWNER-RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27397319

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR CLYDE A JUSTMAN

Mailing Address 1610 S 108TH ST

City

OMAHA

State

NE

Zip Code

68144-1808

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

BRUSH MFG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27397343

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES L BOYKIN

Mailing Address 2390 ROSEDALE DR

City

LAS CRUCES

State

NM

Zip Code

88005-1448

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27397350

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM F MACK

Mailing Address 53 BETTY POND RD

City

HOPE

State

RI

Zip Code

02831-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27397375

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR A D MCDONALD

Mailing Address 33 ALFREDA CT

City

MORRISONVILLE

State

NY

Zip Code

12962-4101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27397392

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MR RONALD P P MAIER

Mailing Address 58 HORSE FENCE HILL RD

City

SOUTHBURY

State

CT

Zip Code

06488-2186

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEED

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27397410

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 358 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN E SHANAHAN

Mailing Address 1901 LUPINE LN

City

TEMPLETON

State

CA

Zip Code

93465-8485

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27397424

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL J J FARMER

Mailing Address 623 SUNSHINE ST

City

WALDRON

State

AR

Zip Code

72958-7020

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. FOREST SERVICE

Occupation
FORESTRY TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27397438

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH J KENDALL

Mailing Address 3875 SUMMER GROVE WAY N

City

JACKSONVILLE

State

FL

Zip Code

32257-8878

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTL PAPER CO

Occupation
BUS SYS SPCLST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27397450

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MARC S S RUBY

Mailing Address 176 BROADWAY

City

HAMDEN

State

CT

Zip Code

06518-2616

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27397452

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR F P KREHFT

Mailing Address 806 SAXE CT

City

CHESAPEAKE

State

VA

Zip Code

23322-7259

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27397465

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL MAKAY

Mailing Address 37261 COUNTY ROAD 669

City

DECATUR

State

MI

Zip Code

49045-8943

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27397475

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)

495.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 360 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES ELSEA

Mailing Address 34 MAPLE AVE

City

WOLCOTT

State

CT

Zip Code

06716-3312

FEC ID number of contributing
federal political committee.

C

Name of Employer
ET DUPONT

Occupation

NC & QC PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27397560

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID L PAULITSCH

Mailing Address 18438 MUNN RD

City

CHAGRIN FALLS

State

OH

Zip Code

44023-6158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27397563

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

REVERE SAMPSON

Mailing Address 19 GALENA PL

City

MOUND HOUSE

State

NV

Zip Code

89706-7052

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27397586

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 361 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR NELSON LANZA

Mailing Address 5223 WILSHIRE LN

City

OAKDALE

State

NY

Zip Code

11769-1449

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27397651

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

MR HAMILTON W STILES, JR

Mailing Address PO BOX 1

City

DAMERON

State

MD

Zip Code

20628-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27397748

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR RALPH J CUTTONE

Mailing Address 2995 SOUTHPARK

City

PRESCOTT

State

AZ

Zip Code

86305-6418

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27397758

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RAYMOND E SEELYE

Mailing Address PO BOX 823

City

CALIENTE

State

NV

Zip Code

89008-0823

FEC ID number of contributing
federal political committee.

C

Name of Employer
VEGA VENDING

Occupation

TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27397760

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM G GILPIN

Mailing Address PO BOX 1709

City

NOME

State

AK

Zip Code

99762-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27397768

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

DR STEVE BANKS

Mailing Address 3440 BELL STREET
SUITE 230

City

AMARILLO

State

TX

Zip Code

79109

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27397772

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR STEVE BANKS

Mailing Address 3440 BELL STREET
SUITE 230

City State Zip Code
AMARILLO TX 79109

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27397774

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH STRAND

Mailing Address 2232 CROSSROAD TRL

City State Zip Code
VIRGINIA BEACH VA 23456-3538

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27397780

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS CAROLINE WOLF

Mailing Address 4813 ASPEN HILL RD

City State Zip Code
ROCKVILLE MD 20853-3017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27397836

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HENRY HAIGH

Mailing Address 955 N HUGHES RD

City

HOWELL

State

MI

Zip Code

48843-9124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27397841

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE S BARNEY, JR

Mailing Address 12047 225TH ST

City

CAMBRIA HEIGHTS

State

NY

Zip Code

11411-2117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27397845

Amount of Each Receipt this Period

325.00

C.

Full Name (Last, First, Middle Initial)

MR KIRBY SENSENIG

Mailing Address 705 SWAMP BRIDGE RD

City

DENVER

State

PA

Zip Code

17517-9513

FEC ID number of contributing
federal political committee.

C

Name of Employer
RICHARD L. SENSENIG CO.

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27397873

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 365 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DEWEY L WHITLEY

Mailing Address 4414 STONE QUARRY RD

City

GREENSBORO

State

NC

Zip Code

27405-9432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27397890

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES B PRICE

Mailing Address 5515 DELMAR ST

City

FAIRMONT CITY

State

IL

Zip Code

62201-2418

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27397902

Amount of Each Receipt this Period

37.00

C.

Full Name (Last, First, Middle Initial)

MR DOUGLAS A BROWN

Mailing Address 1554 SILO RD

City

YARDLEY

State

PA

Zip Code

19067-4255

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALSTOM POWER

Occupation

ENGINEER - RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27397907

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

787.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LLOYD A WEBB

Mailing Address 293 W 6TH ST

City

DEER PARK

State

NY

Zip Code

11729-6543

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27397908

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID R NOWLIN

Mailing Address 18526 TETLEY RD

City

BROOKINGS

State

OR

Zip Code

97415-7121

FEC ID number of contributing
federal political committee.

C

Name of Employer
BRANDY PEAK DISTILLERY

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27397925

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR EARL PRECHTEL

Mailing Address 914 HEATHER LAKE DR

City

COLLIERVILLE

State

TN

Zip Code

38017-6103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	8

Transaction ID: 27397948

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN J MCGRATH

Mailing Address PO BOX 145

City

MOHEGAN LAKE

State

NY

Zip Code

10547-0145

FEC ID number of contributing
federal political committee.

C

Name of Employer
METRO NORTH

Occupation

RAIL ROAD WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27397966

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR BRUCE W SMITH

Mailing Address PO BOX 1544

City

WRANGELL

State

AK

Zip Code

99929-1544

FEC ID number of contributing
federal political committee.

C

Name of Employer
GRASLE & ASSOCIATES FAIRB-
ANKS

Occupation

LINE MAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27397988

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR JERRY RICHARDSON

Mailing Address 65 CARSONVILLE RD

City

ELK CREEK

State

VA

Zip Code

24326-2011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27397991

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 368 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LLOYD H ARMSTRONG

Mailing Address RR 2 BOX 35

City

BUCKEYE

State

WV

Zip Code

24924-9635

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE LANE CONSTRUCTION CORP

Occupation

CONSTRUCTION FOREMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27398026

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR HERBERT J J SCHWARTZ

Mailing Address 1932 LADENBURG DR

City

WESTBURY

State

NY

Zip Code

11590-5916

FEC ID number of contributing
federal political committee.

C

Name of Employer

CBS

Occupation

TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27398028

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN E HAAS

Mailing Address 466 EATONTOWN RD

City

PORT JERVIS

State

NY

Zip Code

12771-3604

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT CO

Occupation

TELEPHONE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27398069

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RANDALL E BATCHELDER

Mailing Address 2265 STATE ROUTE 40

City

GREENWICH

State

NY

Zip Code

12834-4324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27398072

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

M G REMPFER

Mailing Address 5032 W BRIGANTINE CT

City

WILMINGTON

State

DE

Zip Code

19808-1819

FEC ID number of contributing
federal political committee.

C

Name of Employer
WILD LEITZ USA

Occupation

MANAGER OF TECH SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27398109

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN F F STUHLIK

Mailing Address PO BOX 264

City

WINDSOR

State

WI

Zip Code

53598-0264

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF WISCONSIN, DHFS,
MEND

Occupation

RESIDENT AIDE TECH 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27398129

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 370 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CLARENCE G G MARKS

Mailing Address 8520 POLARIS DR

City

BAHAMA

State

NC

Zip Code

27503-9604

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
LOGGING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27398134

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MRS LINDA RAINWATER

Mailing Address 1833 N JUANITA AVE

City

ODESSA

State

TX

Zip Code

79763-6623

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27398202

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR RENE COOPER

Mailing Address PO BOX 303

City

CALCIUM

State

NY

Zip Code

13616-0303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27398267

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 371 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ARTHUR REED

Mailing Address 25 FORRENCE DR

City

HOLLIS

State

NH

Zip Code

03049-6203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27398297

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR JAY A WATSON

Mailing Address 900 SPRING VIEW DR

City

LENOIR CITY

State

TN

Zip Code

37772-4018

FEC ID number of contributing
federal political committee.

C

Name of Employer
CVS DS INC

Occupation

WAREHOUSE WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27398298

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL T MCCAULEY

Mailing Address 6633 MAYRANT CIR

City

SUMTER

State

SC

Zip Code

29154-9264

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27398336

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 372 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR ALEX B RUSSELL, JR

Mailing Address PO BOX 3302

City

SOLDOTNA

State

AK

Zip Code

99669-3302

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27398361

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR FRANK GAVITT

Mailing Address 6501 MEADOWCREST LN

City

FLOWER MOUND

State

TX

Zip Code

75022-6342

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRICON

Occupation

VP ENGINEERING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27398419

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH J KENDALL

Mailing Address 3875 SUMMER GROVE WAY N

City

JACKSONVILLE

State

FL

Zip Code

32257-8878

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTL PAPER CO

Occupation

BUS SYS SPCLST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: 27398431

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 373 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DOUGLAS KRZYZEWSKI

Mailing Address 1157 ARDMORE HWY

City

TAFT

State

TN

Zip Code

38488-5036

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
MACHINIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27398495

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL P ZUBER

Mailing Address 5142 BRIERCLIFF DR

City

HAMBURG

State

NY

Zip Code

14075-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27398513

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR BENJAMIN F F MCGILVRAY

Mailing Address 349 N FALLSVIEW LN

City

WAKE FOREST

State

NC

Zip Code

27587-5707

FEC ID number of contributing
federal political committee.

C

Name of Employer
NC DEPT OF STATE TREASURER

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27398589

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 374 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL PENNIE

Mailing Address PO BOX 543

City

COLFAX

State

NC

Zip Code

27235-0543

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27398615

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR GREG THOMAS

Mailing Address 5125 E 161ST ST

City

NOBLESVILLE

State

IN

Zip Code

46062-6914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27398672

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL JANIUS

Mailing Address 103 PLEASANT VIEW RD

City

PLEASANT VALLEY

State

NY

Zip Code

12569-7218

FEC ID number of contributing
federal political committee.

C

Name of Employer
CYBER CHRON CORP

Occupation
MACHINIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27398711

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 375 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES ELSEA

Mailing Address 34 MAPLE AVE

City

WOLCOTT

State

CT

Zip Code

06716-3312

FEC ID number of contributing
federal political committee.

C

Name of Employer
ET DUPONT

Occupation

NC & QC PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27398715

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM J J PROEFROCK

Mailing Address 367 BEARTOWN RD

City

PORT CRANE

State

NY

Zip Code

13833-1109

FEC ID number of contributing
federal political committee.

C

Name of Employer
NY STATE

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27398722

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH J MASNERI

Mailing Address PO BOX 111793

City

ANCHORAGE

State

AK

Zip Code

99511-1793

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

COMMERCIAL SALMON FISHING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27398724

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 376 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

JAN E SNYDER

Mailing Address PO BOX 211

City

COUDERSPORT

State

PA

Zip Code

16915-0211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27398739

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

JAN E SNYDER

Mailing Address PO BOX 211

City

COUDERSPORT

State

PA

Zip Code

16915-0211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27398742

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR EMIL LAGERSTAM

Mailing Address 9470 FM 491

City

LYFORD

State

TX

Zip Code

78569-2501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	8

Transaction ID: 27398783

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 377 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KENNETH A FULLER

Mailing Address 456 FULLER RD

City

LOUISBURG

State

NC

Zip Code

27549-7704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27398786

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES W W ALEXANDER

Mailing Address 1110 SHERWOOD LN APT 106

City

NICHOLS HILLS

State

OK

Zip Code

73116-6516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

CHEMICAL ENGINEER - RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27398809

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN DEGIACOMO

Mailing Address 73 MIDWOOD AVE

City

FARMINGDALE

State

NY

Zip Code

11735-5352

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27398849

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

715.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 378 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

B A ROBINSON

Mailing Address PO BOX 234

City

RUSHVILLE

State

NY

Zip Code

14544-0234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27398859

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

B A ROBINSON

Mailing Address PO BOX 234

City

RUSHVILLE

State

NY

Zip Code

14544-0234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27398862

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT P P OGIE

Mailing Address 108 COMMUNITY MANOR DR APT 2

City

ROCHESTER

State

NY

Zip Code

14623-2736

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27398928

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 379 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LARRY E BRANIFF

Mailing Address 512 S NEPONSIT DR

City

VENICE

State

FL

Zip Code

34293-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27398953

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR KEITH R CLARK

Mailing Address 1236 JA RICH FARM RD

City

STANLEY

State

NC

Zip Code

28164-9204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27399044

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MR BERNARD J HARTMAN

Mailing Address 1659 HARTMAN DR

City

CORNING

State

NY

Zip Code

14830-9372

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27399054

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 380 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GERALD J KUCHERA

Mailing Address 6784 OYSTER CV

City

WEST BLOOMFIELD

State

MI

Zip Code

48323-2049

FEC ID number of contributing
federal political committee.

C

Name of Employer
FORD MOTOR COOccupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27399068

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR GAROLD E SMITH

Mailing Address 106 MAY ST

City

BATH

State

NY

Zip Code

14810-9753

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
AUTO REPAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	0	8

Transaction ID: 27399110

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR WESLEY L L MUELLER

Mailing Address PO BOX 769

City

TONOPAH

State

AZ

Zip Code

85354

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27399121

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM T MANNION

Mailing Address 2590 HULBERT RD

City

INTERLOCHEN

State

MI

Zip Code

49643-9272

FEC ID number of contributing
federal political committee.

C

Name of Employer
IBEW LOCAL 58

Occupation

RETIRED ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27399161

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR HENRY KOMASARA

Mailing Address 64200 TIPPERARY DR

City

WASHINGTON

State

MI

Zip Code

48095-2556

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27399169

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR NORBERT SZABLA

Mailing Address 7271 PINE RD

City

LEXINGTON

State

MI

Zip Code

48450-8678

FEC ID number of contributing
federal political committee.

C

Name of Employer
JOHN MILLER ELECT

Occupation

ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27399212

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 382 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JEFFERY D RAPP

Mailing Address 5816 POPLAR DR

City

BOISE

State

ID

Zip Code

83704-7633

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27399232

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR M PEGG

Mailing Address 102 ARROWHEAD LN

City

BOERNE

State

TX

Zip Code

78006-8929

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27399279

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR PHILLIP J PETRI

Mailing Address 3181 FERNDAL ST

City

LAS VEGAS

State

NV

Zip Code

89121-2602

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27399283

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 383 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES LARSEN

Mailing Address 38330 MOUNT KISCO DR

City

STERLING HEIGHTS

State

MI

Zip Code

48310-3425

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27399289

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD G DUBEAU

Mailing Address #19
2207 NW FILLMORE AVE

City

CORVALLIS

State

OR

Zip Code

97330-5638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27399304

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR HENRY W WEST

Mailing Address 330 SPEZIA DR

City

OXFORD

State

MI

Zip Code

48371-4749

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27399338

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JIM TROWBRIDGE

Mailing Address 2654 31ST ST

City

SANTA MONICA

State

CA

Zip Code

90405-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27399342

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM H JONES, JR

Mailing Address PO BOX 56

City

HARROGATE

State

TN

Zip Code

37752-0056

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27399343

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JEROME A CUSHMAN

Mailing Address 18505 RAYBURN HWY

City

PRESQUE ISLE

State

MI

Zip Code

49777-8355

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27399362

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 385 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR T MCHART

Mailing Address 19043 SANTA MARIA AVE

City

CASTRO VALLEY

State

CA

Zip Code

94546-3114

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNEMPLOYED

Occupation
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27399375

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

D BROWN

Mailing Address 391 LEECHES RD

City

ELLIJAY

State

GA

Zip Code

30540-7354

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27399460

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

MR DON CARSWELL

Mailing Address 304 SAPPHIRE AVE

City

NEWPORT BEACH

State

CA

Zip Code

92662-1147

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
BOAT BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27399502

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 386 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PAUL H BERGH

Mailing Address 2705 W DECKERVILLE RD

City

CARO

State

MI

Zip Code

48723-9663

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27399515

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR WAYNE USKO

Mailing Address 83 WINDY WAY

City

REEDSVILLE

State

PA

Zip Code

17084-9622

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27399530

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR PHILIP L WATTS, JR

Mailing Address 10 HOFF RD

City

UNION BRIDGE

State

MD

Zip Code

21791-9026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27399536

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 387 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DENNIS A STEPHENS

Mailing Address PO BOX 593

City

WEST BRANCH

State

MI

Zip Code

48661-0593

FEC ID number of contributing
federal political committee.

C

Name of Employer
GM TRUCK & BUS

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27399547

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES M MILLER

Mailing Address 517 W 113TH ST APT 75

City

NEW YORK

State

NY

Zip Code

10025-8065

FEC ID number of contributing
federal political committee.

C

Name of Employer
CROSS COUNTRY CONSTRUCTION

Occupation

SURVEYOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27399549

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES F NELSON

Mailing Address 6154 PRENTER RD

City

SETH

State

WV

Zip Code

25181-9619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27399551

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 388 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHARLES F NELSON

Mailing Address 6154 PRENTER RD

City

SETH

State

WV

Zip Code

25181-9619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27399553

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS L NELSON

Mailing Address 9565 W LEHMAN RD

City

DEWITT

State

MI

Zip Code

48820-9155

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

RETIRED ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Transaction ID: 27399565

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR EDWARD L JORDAN

Mailing Address 354 RICHARD AVE APT C4

City

HICKSVILLE

State

NY

Zip Code

11801-1240

FEC ID number of contributing
federal political committee.

C

Name of Employer
AT&T INFORMATION SYS

Occupation

SYSTEMS TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27399606

Amount of Each Receipt this Period

85.00

SUBTOTAL of Receipts This Page (optional)

385.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 389 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR G W W QUARANDILLO

Mailing Address 1865 LARAWAY LAKE DR SE

City

GRAND RAPIDS

State

MI

Zip Code

49546-6638

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAKELANDLIBRARY CO-OP

Occupation

DELIVERY DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27399661

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

DR LAURIE J LANDEAU

Mailing Address 367 ASHAROKEN AVE

City

NORTHPORT

State

NY

Zip Code

11768-1168

FEC ID number of contributing
federal political committee.

C

Name of Employer
LISTOWEL, INC

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27399740

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

DR LAURIE J LANDEAU

Mailing Address 367 ASHAROKEN AVE

City

NORTHPORT

State

NY

Zip Code

11768-1168

FEC ID number of contributing
federal political committee.

C

Name of Employer
LISTOWEL, INC

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27399742

Amount of Each Receipt this Period

-2000.00

SUBTOTAL of Receipts This Page (optional)

20.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 390 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID J BARTOLI

Mailing Address 24528 VIA PRIMERO

City

MURRIETA

State

CA

Zip Code

92562-3944

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOLAR SUN RINGS, INC.Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27399855

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR MARK RANDOLPH

Mailing Address RR 1 BOX 361

City

SCOTTDAL

State

PA

Zip Code

15683-9302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27399865

Amount of Each Receipt this Period

275.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM DINOULIS

Mailing Address 29 HILLSIDE RD

City

BROOMALL

State

PA

Zip Code

19008-1405

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHARA C. HAASOccupation
GROUNDSKEEPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Transaction ID: 27399882

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 391 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KEITH PEARSON

Mailing Address 22102 CAPE MAY LN

City

HUNTINGTON BEACH

State

CA

Zip Code

92646-8415

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27399884

Amount of Each Receipt this Period

-2500.00

B.

Full Name (Last, First, Middle Initial)

MR K J PAWLOVICH

Mailing Address 3008 PILGRIMS SQ APT D

City

WALDORF

State

MD

Zip Code

20602-1921

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27399901

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

MRS WINDY ROCCHILD

Mailing Address 6025 PARK WOOD CT

City

AUSTELL

State

GA

Zip Code

30106-2757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27399986

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

-1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 392 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR HARIS EHLAND

Mailing Address 4104 HELENS POURIOFF AVE

City

NORTH LAS VEGAS

State

NV

Zip Code

89085-4460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27400002

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR WAYNE CHOATE

Mailing Address PO BOX 1227

City

MOUNTAIN VIEW

State

AR

Zip Code

72560-1227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 27400009

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT J J MODROO

Mailing Address 406 W AVENUE C

City

NEWBERRY

State

MI

Zip Code

49868-1707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27400042

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 393 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LYNDON OPDYKE

Mailing Address 769 E DAFFODIL LN

City

BELOIT

State

WI

Zip Code

53511-1607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27400069

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES C ENGMAN

Mailing Address W226N1597 NORTH AVE

City

WAUKESHA

State

WI

Zip Code

53186-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27400116

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

CHRIS BUSCAGLIA

Mailing Address 1322 W OHIO AVE

City

MILWAUKEE

State

WI

Zip Code

53215-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN MOTORS

Occupation

WELDER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27400122

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 394 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BEN CHRISTMAS

Mailing Address 126 HODGES RD

City

RUSTON

State

LA

Zip Code

71270-2570

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27400141

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR W E MCELLROY

Mailing Address 6365 LONGWOOD DR

City

ERIE

State

PA

Zip Code

16505-1024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27400155

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR ALFRED M WAUGH

Mailing Address 123 PACIFIC DR

City

STATESVILLE

State

NC

Zip Code

28677-2058

FEC ID number of contributing
federal political committee.

C

Name of Employer
SMITH SETZER & SONSOccupation
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27400166

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 395 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

GLENN BRAUN

Mailing Address N5519 OAK RD

City

PLYMOUTH

State

WI

Zip Code

53073-3944

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27400280

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

COL RUSSELL M HELLER

Mailing Address 201 W CALLE LECHO

City

GREEN VALLEY

State

AZ

Zip Code

85622-1603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27400303

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR NORMAN WHISLER

Mailing Address 110 N BERGER PKWY APT 9

City

FOND DU LAC

State

WI

Zip Code

54935-7914

FEC ID number of contributing
federal political committee.

C

Name of Employer

U W

Occupation

METALLURGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27400313

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL B PAUL

Mailing Address N1397 COUNTY ROAD T

City

BIRCHWOOD

State

WI

Zip Code

54817-9115

FEC ID number of contributing
federal political committee.

C

Name of Employer
PAUL'S SHEET METAL INC

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27400333

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR ED S DORMAN

Mailing Address 1011 HIGHLAND WAY

City

BOWLING GREEN

State

KY

Zip Code

42104-3860

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27400348

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MRS DOROTHY L TAYLOR

Mailing Address 1320 DAISEY LN

City

TEMPLE

State

TX

Zip Code

76502-4820

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27400360

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

670.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ANDREW C FRECHTLING

Mailing Address 1141 GREATHOUSE RD

City

WAXAHACHIE

State

TX

Zip Code

75167-8309

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTHWEST AIRLINES

Occupation
PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27400362

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR LEROY CHRISTIANSEN

Mailing Address 2713 CLOVER RD

City

MANITOWOC

State

WI

Zip Code

54220-8821

FEC ID number of contributing
federal political committee.

C

Name of Employer
HEIN PLUMBING INC

Occupation
PLUMBING CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27400366

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD M DAVIS

Mailing Address 5433 MISSION DR

City

MISSION HILLS

State

KS

Zip Code

66208-1130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27400403

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

495.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 398 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BRUCE ADAMSKI

Mailing Address 1650 MEADOW VIEW LN

City

STEVENS POINT

State

WI

Zip Code

54481-9494

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27400415

Amount of Each Receipt this Period

113.00

B.

Full Name (Last, First, Middle Initial)

MR STANLEY B GORSKI

Mailing Address 2911 CHESTNUT ST

City

WISCONSIN RAPIDS

State

WI

Zip Code

54494-5573

FEC ID number of contributing
federal political committee.

C

Name of Employer
N PAPERS INC

Occupation
QUALITY CONTROL TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27400432

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR SCOTT FARRIS

Mailing Address 5737 KANAN RD # 160

City

AGOURA HILLS

State

CA

Zip Code

91301-1601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27400450

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

243.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 399 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT C VOIGT

Mailing Address 1113 KANSAS AVE

City

ATCHISON

State

KS

Zip Code

66002-2345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27400457

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MS ELLIE G HARRIS

Mailing Address 1502 COUNTRY CLUB DR

City

ESTES PARK

State

CO

Zip Code

80517-7595

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27400476

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM ESTEP

Mailing Address 3916 NW 56TH PL

City

OKLAHOMA CITY

State

OK

Zip Code

73112-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27400496

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

575.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 400 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT M MORGAN, JR

Mailing Address 105 POLILLIO AVE

City

STOUGHTON

State

MA

Zip Code

02072-3972

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27400534

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR RONALD L CARROW

Mailing Address 4131 N 60TH AVE

City

OMAHA

State

NE

Zip Code

68104-2712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27400584

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM BARNETT

Mailing Address 501 ROACH ST

City

BOWIE

State

TX

Zip Code

76230-2704

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27400601

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 401 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR H L L COX, JR

Mailing Address 2539 DUNDEE RD

City

LOUISVILLE

State

KY

Zip Code

40205-2415

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF LOUISVILLE

Occupation

PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27400622

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR ERIC BARACH

Mailing Address 8788 INDIAN TRL

City

CLARKSTON

State

MI

Zip Code

48348-2536

FEC ID number of contributing
federal political committee.

C

Name of Employer
HURLEY HOSPITAL EMERGENCY
DEPT

Occupation

M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27400645

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR STANLEY LEE

Mailing Address 4415 MONITOR ROCK LN

City

COLORADO SPRINGS

State

CO

Zip Code

80904-4717

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27400668

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 402 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HERBERT J SUGDEN, JR

Mailing Address 2150 KURT CT

City

APOPKA

State

FL

Zip Code

32703-9405

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

SCUBA INSTRUCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27400767

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT HOUSE

Mailing Address PO BOX 7

City

MC CRACKEN

State

KS

Zip Code

67556-0007

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27400774

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL R MASON

Mailing Address 8262 S 50TH ST

City

OMAHA

State

NE

Zip Code

68157-2545

FEC ID number of contributing
federal political committee.

C

Name of Employer
US AIR FORCE

Occupation

METEOROLOGIST TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27400783

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

5055.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 403 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROGER LEIB

Mailing Address 209 E OAK ST

City

ALLERTON

State

IA

Zip Code

50008-9770

FEC ID number of contributing
federal political committee.

C

Name of Employer
US GOVERNMENT

Occupation
US NAVY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27400784

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ROGER LEIB

Mailing Address 209 E OAK ST

City

ALLERTON

State

IA

Zip Code

50008-9770

FEC ID number of contributing
federal political committee.

C

Name of Employer
US GOVERNMENT

Occupation
US NAVY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27400786

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DONALD O FRIEDERICH, SR

Mailing Address 1007 N KANSAS AVE

City

CHANUTE

State

KS

Zip Code

66720-1109

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27400816

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 404 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR REX C BARSTOW

Mailing Address 2011 N PORTER AVE APT 131

City

WICHITA

State

KS

Zip Code

67203-2296

FEC ID number of contributing
federal political committee.

C

Name of Employer
CESSNA

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27400822

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR FRANKLIN POPE

Mailing Address 516 BREWINGTON RD

City

LAURENS

State

SC

Zip Code

29360-8016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27400827

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR R A BRENK, JR

Mailing Address 14101 W TAFT ST

City

WICHITA

State

KS

Zip Code

67235-8411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27400864

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 405 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR JOHN C HALL

Mailing Address 1259 IRONWOOD DR

City

WILLIAMSTON

State

MI

Zip Code

48895-9704

FEC ID number of contributing
federal political committee.

C

Name of Employer
BLUE CROSS BLUE SHIELDOccupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27400892

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

LTCOL JOHN P BERNHARD

Mailing Address 208 METAIRE LN

City

MADISON

State

AL

Zip Code

35758-8768

FEC ID number of contributing
federal political committee.

C

Name of Employer
CSEOccupation
TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27400983

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

E B ARMSTRONG

Mailing Address 3015 LAWTON LN

City

ATHENS

State

GA

Zip Code

30601-1102

FEC ID number of contributing
federal political committee.

C

Name of Employer
ATHENS REGIONAL MEDICAL
CENTEROccupation
RETIRED-ENGINEERING DEPT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27400989

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 406 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT M OSMICK

Mailing Address 16251 CHURCH ST

City

MARCELLUS

State

MI

Zip Code

49067-9587

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27400993

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR EARLE G KENNELLEY

Mailing Address 516 N A ST

City

ARKANSAS CITY

State

KS

Zip Code

67005-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27400997

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR EARLE G KENNELLEY

Mailing Address 516 N A ST

City

ARKANSAS CITY

State

KS

Zip Code

67005-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27400999

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 407 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MAJ JAMES H H PAGE

Mailing Address 6042 SLEEPY HOLLOW RD

City

ROME

State

NY

Zip Code

13440-0913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

Transaction ID: 27401012

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD G BOWMAN

Mailing Address 1825 N WINDS DR

City

WINSTON SALEM

State

NC

Zip Code

27127-4606

FEC ID number of contributing
federal political committee.

C

Name of Employer
US AIRWAYS

Occupation

INSPECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

Transaction ID: 27401022

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILBUR W FLATLAND

Mailing Address N11648 670TH ST

City

WHEELER

State

WI

Zip Code

54772-9478

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

Transaction ID: 27401061

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 408 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KENNETH P P HASENBEIN

Mailing Address 400 COLLINS 124-320

City

CEDAR RAPIDS

State

IA

Zip Code

52498-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
US AIR FORCEOccupation
OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27401085

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH P P HASENBEIN

Mailing Address 400 COLLINS 124-320

City

CEDAR RAPIDS

State

IA

Zip Code

52498-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
US AIR FORCEOccupation
OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27401087

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MR DIETER H EWALD

Mailing Address 26131 ALTADENA DR

City

LOS ALTOS HILLS

State

CA

Zip Code

94022-2009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

Transaction ID: 27401166

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 409 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MARSHALL P WILLIAMS

Mailing Address RR 5 BOX 1482

City

HEMPHILL

State

TX

Zip Code

75948-9663

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALPHA NETWORKS

Occupation

NETWORK ENGINEER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27401187

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

O E CHRISTIANSON

Mailing Address 6927 QUEMOY CT

City

SAN DIEGO

State

CA

Zip Code

92111-5608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27401233

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR GEOFFREY GEROW

Mailing Address 4115 MAPLETON RD

City

LOCKPORT

State

NY

Zip Code

14094-9622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27401261

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 410 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT HARDY

Mailing Address 6667 EDMONTON AVE

City

SAN DIEGO

State

CA

Zip Code

92122-2516

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOWARD HUGHS MEDICAL INST-
ITUTE

Occupation

RESEARCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27401269

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR DEAN W LLOYD

Mailing Address 1100 WILLIAMS CT

City

CLAREMORE

State

OK

Zip Code

74017-3614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27401307

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR WALLACE D WATSON

Mailing Address 5106 S 163RD RD

City

BOLIVAR

State

MO

Zip Code

65613-8555

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27401313

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 411 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR REX E SEALS

Mailing Address PO BOX 523

City

COTTAGE GROVE

State

OR

Zip Code

97424-0022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27401339

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR LEONARD K WASKA

Mailing Address PO BOX 160

City

FLATONIA

State

TX

Zip Code

78941-0160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27401369

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR MILTON BOSE, JR

Mailing Address 6305 SHELTER CREEK LN

City

SAN BRUNO

State

CA

Zip Code

94066-3871

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN FRANCISCO MUNICIPAL
RAIL

Occupation

ELEC TRANSIT SYSTEM MECHANIC

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27401378

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 412 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

NICK TERLIZZI, JR

Mailing Address 37 NORTH RD

City

KINNELON

State

NJ

Zip Code

07405-2277

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27401405

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR HARRY B WOLF

Mailing Address 12 ARLINGTON DR

City

PLACIDA

State

FL

Zip Code

33946-2301

FEC ID number of contributing
federal political committee.

C

Name of Employer
REVLON

Occupation
CHEMIST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27401408

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR JIM L FILSON

Mailing Address 1900 NW 56TH ST

City

OKLAHOMA CITY

State

OK

Zip Code

73118-1406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27401468

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 413 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DALE WILLS

Mailing Address 641 COUNTY ROUTE 39

City

CHATEAUGAU

State

NY

Zip Code

12920

FEC ID number of contributing
federal political committee.

C

Name of Employer
DALE WILLS

Occupation

DAIRY FARMER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27401474

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

J E HEARD

Mailing Address 5105 LOS ALAMITOS CT

City

MIDLAND

State

TX

Zip Code

79705-2856

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27401476

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID SHANK

Mailing Address 1381 WINDSOR LN

City

MT CRAWFORD

State

VA

Zip Code

22841-9702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27401483

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

825.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 414 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

QUANAH JAMES

Mailing Address 9643 SUGARLOAF MT RD

City

BENNINGTON

State

OK

Zip Code

74723-2302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27401493

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR STANLEY GRAFJE

Mailing Address 694 1ST ST

City

SECAUCUS

State

NJ

Zip Code

07094-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer
S B THOMAS INC

Occupation
MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27401506

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

L W FERRENCE

Mailing Address PO BOX 291347

City

KERRVILLE

State

TX

Zip Code

78029-1347

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27401530

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 415 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EUGENE REINHART

Mailing Address PO BOX 659

City

CAPE VINCENT

State

NY

Zip Code

13618-0659

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27401531

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR TOMMY D ROBY

Mailing Address 140 FARMINGTON DR

City

STAUNTON

State

VA

Zip Code

24401-6282

FEC ID number of contributing
federal political committee.

C

Name of Employer
US INVESTIGATIONS SERVICE
LLC

Occupation

VP / PROGRAM MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27401536

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR KEN STANFEL

Mailing Address 42328 71ST ST W

City

LANCASTER

State

CA

Zip Code

93536-7357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27401545

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 416 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL J DEJONG

Mailing Address 2420 DODGEVILLE RD

City

JEFFERSON

State

OH

Zip Code

44047-8552

FEC ID number of contributing
federal political committee.

C

Name of Employer

ASHTABULA CO MEDICAL CENT-
ER

Occupation

HVAC MECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27401549

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ROY POWLEY

Mailing Address 1085 MALLARD DR

City

BRADLEY

State

IL

Zip Code

60915-1319

FEC ID number of contributing
federal political committee.

C

Name of Employer

MAINTENANCE

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 1 / 2 0 0 8

Transaction ID: 27401558

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS GRESHAM

Mailing Address PO BOX 2147

City

MOUNT PLEASANT

State

TX

Zip Code

75456-2147

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27401568

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOSEPH A PAULI

Mailing Address 2293 E 26TH WAY

City

YUMA

State

AZ

Zip Code

85365-3261

FEC ID number of contributing
federal political committee.

C

Name of Employer
YUMA REGIONAL MEDICAL CEN-
TER

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	8

Transaction ID: 27401581

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR HERBERT F HAHN

Mailing Address 50 SANTO DOMINGO DR

City

TOMS RIVER

State

NJ

Zip Code

08757-6432

FEC ID number of contributing
federal political committee.

C

Name of Employer
MATAWAN BORO POLICE

Occupation

SPL POLICEMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27401583

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)

MR SCOTT A JACKSON

Mailing Address 13868 JANUS AVE

City

SPARTA

State

WI

Zip Code

54656-8078

FEC ID number of contributing
federal political committee.

C

Name of Employer
BRENENGER AUTO

Occupation

WARRANTY ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

Transaction ID: 27401588

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CARTER L L DUNKIN

Mailing Address 10 ANDRE DR

City

DES PERES

State

MO

Zip Code

63131-3901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27401597

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR AUSTIN CULP

Mailing Address 23833 CANTERBURY SANDS TRL

City

BATTLE LAKE

State

MN

Zip Code

56515-9100

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27401686

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN DOHERTY

Mailing Address 704 N 19TH ST

City

NORFOLK

State

NE

Zip Code

68701-2528

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27401723

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDWARD S MARTIN

Mailing Address 1046 WOODBERRY RD

City

NEW KENSINGTON

State

PA

Zip Code

15068-5308

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALCOA

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27401733

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR EDWARD S MARTIN

Mailing Address 1046 WOODBERRY RD

City

NEW KENSINGTON

State

PA

Zip Code

15068-5308

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALCOA

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27401735

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR ARLIN BIDWELL

Mailing Address 294 NW HILLCREST DR

City

DALLAS

State

OR

Zip Code

97338-1031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27401737

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM B RICE

Mailing Address 6910 HOPEFUL RD APT 2112

City

FLORENCE

State

KY

Zip Code

41042-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27401803

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR OTTO MC NAUGHTON

Mailing Address 4986 S ISLAND VW

City

BRIMLEY

State

MI

Zip Code

49715-9277

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27401827

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS E FERRELL, III

Mailing Address 1440 S OAKMONT AVE

City

SPRINGFIELD

State

MO

Zip Code

65809-2230

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27401866

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FRANKLIN W NELSON

Mailing Address 6820 SW 43RD ST

City

TOPEKA

State

KS

Zip Code

66610-1571

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27401894

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL J DEJONG

Mailing Address 2420 DODGEVILLE RD

City

JEFFERSON

State

OH

Zip Code

44047-8552

FEC ID number of contributing
federal political committee.

C

Name of Employer
ASHTABULA CO MEDICAL CENT-
ER

Occupation

HVAC MECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27401926

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM A PAINTER

Mailing Address PO BOX 1101

City

WELLINGTON

State

CO

Zip Code

80549-1101

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27401928

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

620.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS P BAALMAN

Mailing Address PO BOX 267

City

GRINNELL

State

KS

Zip Code

67738-0267

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27401946

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR RONALD F VIRANT

Mailing Address PO BOX 357

City

CLINTON

State

PA

Zip Code

15026-0357

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27401971

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR DONN L CROSS

Mailing Address 518 PRATT ST

City

HAMMONTON

State

NJ

Zip Code

08037-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27401988

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 423 / 1300

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR NEIL C MILLER, JR

Mailing Address 116 ANNABELLE AVE

City

TRENTON

State

NJ

Zip Code

8610

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNITED STATES SECURITY AS-
SOC

Occupation

SECURITY SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27401992

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR RALPH S SWOPE

Mailing Address 4253 ROWAN RD

City

BROOKSVILLE

State

FL

Zip Code

34604-8143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27401994

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR ROY S KORONA

Mailing Address 5815 ROCKDALE COURT

City

CENTREVILLE

State

VA

Zip Code

20121-3034

FEC ID number of contributing
federal political committee.

C

Name of Employer
US GOVERNMENT

Occupation

ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27402072

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BILLY E UPTON

Mailing Address 2660 LACLEDE AVE

City

RICHMOND

State

VA

Zip Code

23233-2242

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27402104

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES M MILLER

Mailing Address 2 KENSINGTON CT

City

JOHNSON CITY

State

TN

Zip Code

37601-9290

FEC ID number of contributing
federal political committee.

C

Name of Employer

HAJOCA CORP

Occupation

LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27402106

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR TIMOTHY J LANDING

Mailing Address 245 SAINT ROSE AVE

City

FREDONIA

State

WI

Zip Code

53021-9479

FEC ID number of contributing
federal political committee.

C

Name of Employer

CITY OF PORT WASHINGTON

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27402176

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FRANCIS MCMAHON

Mailing Address 304 GARLAND ST

City

PITTSBURGH

State

PA

Zip Code

15218-1614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27402189

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR R B CARL

Mailing Address 14601 WILSON RD

City

EDMOND

State

OK

Zip Code

73013-1556

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27402220

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DONALD A VOIGT

Mailing Address 61 SCHOOL HOUSE RD

City

CLAYSVILLE

State

PA

Zip Code

15323-2120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27402231

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

W T MCRAE

Mailing Address 9575 RANCHO DR

City

WILLIS

State

TX

Zip Code

77318-6626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27402233

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN SEBER

Mailing Address 632 BIRCH ST

City

JEANNETTE

State

PA

Zip Code

15644-2807

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

UN-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27402304

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN SEBER

Mailing Address 632 BIRCH ST

City

JEANNETTE

State

PA

Zip Code

15644-2807

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

UN-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27402306

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN SEBER

Mailing Address 632 BIRCH ST

City

JEANNETTE

State

PA

Zip Code

15644-2807

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

UN-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27402307

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

H W BRANDON

Mailing Address 13247 W STARDUST BLVD

City

SUN CITY WEST

State

AZ

Zip Code

85375-2558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27402319

Amount of Each Receipt this Period

275.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH R R SIMON

Mailing Address 1806 ARROYO RD

City

RIDGWAY

State

PA

Zip Code

15853-3238

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

FORESTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27402372

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

415.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 428 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID H BARTON

Mailing Address 23 GREENHURST LN

City

EAST HARTFORD

State

CT

Zip Code

06118-2812

FEC ID number of contributing
federal political committee.

C

Name of Employer
INDUSTRIAL SAFETY + SUPPLY

Occupation

DRIVER/SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27402434

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR RAYMOND CORRIS

Mailing Address 24 OAKRIDGE EST

City

EAST STROUDSBURG

State

PA

Zip Code

18302-9497

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27402447

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR EARL H CHAPMAN

Mailing Address 118 SAW MILL RD

City

ELIZABETHTOWN

State

PA

Zip Code

17022-8983

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27402466

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 429 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HERBERT F HAHN

Mailing Address 50 SANTO DOMINGO DR

City

TOMS RIVER

State

NJ

Zip Code

08757-6432

FEC ID number of contributing
federal political committee.

C

Name of Employer
MATAWAN BORO POLICE

Occupation

SPL POLICEMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27402534

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID L SHAFFER

Mailing Address 935 MERCER NEW WILMINGTON RD

City

NEW WILMINGTON

State

PA

Zip Code

16142-2607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	8

Transaction ID: 27402548

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS MADELINE B THOMPSON

Mailing Address 123 N WAYNE ST

City

LEWISTOWN

State

PA

Zip Code

17044-1773

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27402581

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 430 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MRS PAULA UTSEY

Mailing Address PO BOX 829

City

CAREFREE

State

AZ

Zip Code

85377-0829

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27402594

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM A KILMER, JR

Mailing Address 43 JACKSON ST

City

WELLSBORO

State

PA

Zip Code

16901-1924

FEC ID number of contributing
federal political committee.

C

Name of Employer
GTE

Occupation

SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27402607

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR LAWRENCE E BOLIN

Mailing Address 227 S 5TH ST

City

MC SHERRYSTOWN

State

PA

Zip Code

17344-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
C E ARTER

Occupation

UPHOLSTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27402637

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 431 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD L FOULKE, JR

Mailing Address PO BOX 538

City

BAY PINES

State

FL

Zip Code

33744-0538

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27402640

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR MARC HART

Mailing Address 501 SAINT LAURENT CT

City

SOUTHLAKE

State

TX

Zip Code

76092-5874

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

ANESTHESIOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27402660

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL HUTH

Mailing Address 696 BOWERS RD

City

PUNXSUTAWNEY

State

PA

Zip Code

15767-4532

FEC ID number of contributing
federal political committee.

C

Name of Employer
HUTH EXCAVATING

Occupation

CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27402668

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

2220.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 432 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDWARD S SHERRICK

Mailing Address 494 N DUFFY RD

City

BUTLER

State

PA

Zip Code

16001-1140

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDWARD S. SHERRICK

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27402682

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR HERBERT F HAHN

Mailing Address 50 SANTO DOMINGO DR

City

TOMS RIVER

State

NJ

Zip Code

08757-6432

FEC ID number of contributing
federal political committee.

C

Name of Employer

MATAWAN BORO POLICE

Occupation

SPL POLICEMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

896.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27402776

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)

MR NORMAN R R METZ

Mailing Address 1649 MOUNTAIN RD

City

PORT ROYAL

State

PA

Zip Code

17082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27402803

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 433 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN P LEVENGOOD, JR

Mailing Address 908 REDWOOD LN

City

LEBANON

State

PA

Zip Code

17046-2052

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27402811

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES L MAYER

Mailing Address 144 EMS C28 LN

City

WARSAW

State

IN

Zip Code

46582-9079

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

Transaction ID: 27402822

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR MARTIN J J EKIZIAN

Mailing Address PO BOX 2489

City

CARSON CITY

State

NV

Zip Code

89702-2489

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF NEVADAOccupation
CORRECTIONAL OFFICER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	8

Transaction ID: 27402863

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 434 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LEWIS LARSON

Mailing Address 415 TURKEY RUN

City

WINTER PARK

State

FL

Zip Code

32789-6143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27402873

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR KENDALL B NORTHCUTT

Mailing Address 14707 CAROLS WAY DR

City

HOUSTON

State

TX

Zip Code

77070-2222

FEC ID number of contributing
federal political committee.

C

Name of Employer
TIDELAND SIGNAL CORP

Occupation

ENGINEERING MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27402891

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR KENDALL B NORTHCUTT

Mailing Address 14707 CAROLS WAY DR

City

HOUSTON

State

TX

Zip Code

77070-2222

FEC ID number of contributing
federal political committee.

C

Name of Employer
TIDELAND SIGNAL CORP

Occupation

ENGINEERING MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27402894

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 435 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DONALD HASSICK

Mailing Address 639 ONTARIO ST

City

BETHLEHEM

State

PA

Zip Code

18015-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27402896

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

R E ESCH

Mailing Address 825 STONEWALL CT

City

FRANKLIN LAKES

State

NJ

Zip Code

07417-1927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27402906

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE SCHMIEGE

Mailing Address 33 BRETTON PL

City

SAGINAW

State

MI

Zip Code

48602-3629

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

AUTO REPAIR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27402927

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 436 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JERRY NICHOLSON

Mailing Address 1771 BUCK HOLLOW RD

City

CHAPMANSBORO

State

TN

Zip Code

37035-5302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27402937

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR WAYNE SAGER

Mailing Address 5737 CLARKSTOWN RD

City

MUNCY

State

PA

Zip Code

17756-8232

FEC ID number of contributing
federal political committee.

C

Name of Employer
USDA FCIC

Occupation

CROP INS ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27402949

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR RONALD L CARROW

Mailing Address 4131 N 60TH AVE

City

OMAHA

State

NE

Zip Code

68104-2712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	8

Transaction ID: 27402965

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 437 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR AUGUSTUS W RIEGRAF

Mailing Address 1 DREW COURT

City

NORTH CALDWELL

State

NJ

Zip Code

07006-4747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27402979

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES C C COOKMAN, JR

Mailing Address 326 LOCHBRIDGE DR

City

NEW BERN

State

NC

Zip Code

28562-8924

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORTIS FIDELE

Occupation

HANDYMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27403043

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES D WELCH

Mailing Address 8 COMPTON DR

City

GREENVILLE

State

SC

Zip Code

29615-2739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27403045

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 438 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT J J MESSERE

Mailing Address PO BOX 728

City

NEW HOPE

State

PA

Zip Code

18938-0728

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE - RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: 27403049

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR EARL R HARRY

Mailing Address 3949 LOCUST GROVE RD

City

COLUMBIA

State

PA

Zip Code

17512-9204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27403122

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR GARY L FRITZ

Mailing Address PO BOX 486

City

MOUNT WOLF

State

PA

Zip Code

17347-0486

FEC ID number of contributing
federal political committee.

C

Name of Employer
PPL CORPORATIONOccupation
OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27403173

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 439 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT M M WHITE

Mailing Address 1777 HABECKER RD

City

COLUMBIA

State

PA

Zip Code

17512-9690

FEC ID number of contributing
federal political committee.

C

Name of Employer
PENN POWER & LIGHT CO

Occupation

ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27403177

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES M M WINTERROTH

Mailing Address 2027 KATHY WAY

City

TORRANCE

State

CA

Zip Code

90501-5434

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

Transaction ID: 27403207

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ERVIN J RABER

Mailing Address 33308 TOWNSHIP ROAD 219 # T

City

MILLERSBURG

State

OH

Zip Code

44654-9506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

Transaction ID: 27403219

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 440 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ANTHONY GJURASH

Mailing Address 4415 N 15TH ST

City

TACOMA

State

WA

Zip Code

98406-3725

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27403274

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR WADE HOLLOWAY

Mailing Address 409 W BOOTH RD

City

SEARCY

State

AR

Zip Code

72143-8887

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27403332

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR WADE HOLLOWAY

Mailing Address 409 W BOOTH RD

City

SEARCY

State

AR

Zip Code

72143-8887

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27403334

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 441 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KEITH L ZIMMERMAN

Mailing Address 1420 TOPAZ DR

City

MOUNT PLEASANT

State

SC

Zip Code

29466-9430

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIELD SUPPORT SERVICES,
INC.

Occupation

PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27403341

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR JOSEPH E PETRACHONIS

Mailing Address 82 CEMETERY HL

City

RINGTOWN

State

PA

Zip Code

17967-9758

FEC ID number of contributing
federal political committee.

C

Name of Employer
PA POWER & LIGHT

Occupation

JOURNEYMAN LIVEMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27403387

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR RICK BISHOP

Mailing Address 8648 E 127

City

WETUMKA

State

OK

Zip Code

74883-6259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27403406

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

455.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 442 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD W W HATZENBUHLER

Mailing Address 197 DRISCOLL RD

City

DEERING

State

NH

Zip Code

03244-6637

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27403419

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD ZYGMONT

Mailing Address 400 DAVISVILLE RD

City

WILLOW GROVE

State

PA

Zip Code

19090-2729

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27403477

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN CEBALLOS

Mailing Address 7330 FOREST ST

City

GILROY

State

CA

Zip Code

95020-6913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27403575

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KEN A TEMPLETON

Mailing Address PO BOX 270040

City

SUSANVILLE

State

CA

Zip Code

96127-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

ASERETH MEDICAL SERVICES

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27403603

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR STEVE KING

Mailing Address PO BOX 734

City

CORVALLIS

State

OR

Zip Code

97339-0734

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27403609

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR DAG HARALDSON

Mailing Address PO BOX 42

City

WESTHAMPTON

State

NY

Zip Code

11977-0042

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27403655

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 444 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL ZAHODNICK

Mailing Address 1075 DEEP CREEK RD

City

ASHLAND

State

PA

Zip Code

17921-9384

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27403672

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR DARRELL L HALE

Mailing Address 29611 MCMULLEN LN

City

JUNCTION CITY

State

OR

Zip Code

97448-9653

FEC ID number of contributing
federal political committee.

C

Name of Employer

MORSE BROSE

Occupation

EQUIPMENT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27403685

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR STEVE STROYAN

Mailing Address 1608 W BUCKEYE AVE

City

SPOKANE

State

WA

Zip Code

99205-3506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27403707

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 445 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ALLEN J J GLEASON

Mailing Address 462 PARKWAY AVE

City

PENNDL

State

PA

Zip Code

19047-7525

FEC ID number of contributing
federal political committee.

C

Name of Employer
D CARROCHI JR INC

Occupation

CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27403723

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

COL RUSSELL G G STEPHENSON

Mailing Address 4625 BROKEN LUTE WAY

City

ELLICOTT CITY

State

MD

Zip Code

21042-5959

FEC ID number of contributing
federal political committee.

C

Name of Employer
AIR FORCE

Occupation

US MIL DOD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27403753

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR LCOL T WHITE

Mailing Address 6856 JOCKEY CLUB LN

City

HAYMARKET

State

VA

Zip Code

20169-2978

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

MEDICAL DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27403769

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 446 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WALTER E E KAMINSKI

Mailing Address 1355 VALLEY RD

City

WOODYLYN

State

PA

Zip Code

19094-1123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27403800

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JERRY FOX

Mailing Address 2919 S SMEDLEY ST

City

PHILADELPHIA

State

PA

Zip Code

19145-4825

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27403805

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN R R FEESE

Mailing Address 1 WASHINGTON LN

City

CHADDS FORD

State

PA

Zip Code

19317-9417

FEC ID number of contributing
federal political committee.

C

Name of Employer

SUN CO INC

Occupation

MECH ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27403808

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 447 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT H RUMPF

Mailing Address 51 KENWOOD DR

City

CARLISLE

State

PA

Zip Code

17013-2112

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE GLATFELTER PULP WOOD
CO

Occupation

FORESTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27403831

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR EARL K RUPPERT, JR

Mailing Address 19 N MORWOOD AVE

City

WEST LAWN

State

PA

Zip Code

19609-1736

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27403856

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM D GOODRICH

Mailing Address 229 N BRADFORD ST

City

DOVER

State

DE

Zip Code

19904-3103

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHESAPEAKE UTILITIES

Occupation

DRAFTSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27403915

Amount of Each Receipt this Period

104.00

SUBTOTAL of Receipts This Page (optional)

199.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 448 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LOUIS H KNAPP

Mailing Address 14202 CHADWICK LN

City

ROCKVILLE

State

MD

Zip Code

20853-2104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27403943

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD P BERNDT

Mailing Address 2121 EL PASEO ST APT 1510

City

HOUSTON

State

TX

Zip Code

77054-3224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27404029

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR CHESTER M MERCER, JR

Mailing Address 2840 LEISZS BRIDGE RD

City

READING

State

PA

Zip Code

19605-2833

FEC ID number of contributing
federal political committee.

C

Name of Employer

MERCER MACHINE & HYDRAULICS
INC

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27404058

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

395.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 449 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE W W SCHLOTZHAUER

Mailing Address 1773 MASTERSONVILLE RD

City

MANHEIM

State

PA

Zip Code

17545-9432

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27404095

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR WAYNE A A RADDER

Mailing Address 3421 ROCKEFELLER AVE

City

EVERETT

State

WA

Zip Code

98201-4725

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27404103

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR C P P CHACONAS

Mailing Address 3513 TWIN BRANCHES CT

City

SILVER SPRING

State

MD

Zip Code

20906-1467

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27404124

Amount of Each Receipt this Period

28.00

SUBTOTAL of Receipts This Page (optional)

298.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 450 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STEVEN L EVERETT

Mailing Address 8202 SOLANO BAY LOOP, APT. 314

City

TAMPA

State

FL

Zip Code

33635

FEC ID number of contributing
federal political committee.

C

Name of Employer
AERO CONTRACTORS, LTD

Occupation

GENERAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27404143

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN W HOPF, SR

Mailing Address 210 THUNDERBIRD RD

City

STILLWATER

State

PA

Zip Code

17878-9337

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27404182

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN C DIEMAN

Mailing Address 13112 BRANDON WAY RD

City

DARNESTOWN

State

MD

Zip Code

20878-2130

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

CARPET CLEANER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27404229

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 451 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE M HOUSER

Mailing Address RR 1 BOX 340

City

WANN

State

OK

Zip Code

74083-9769

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27404259

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JACK T WEEKS

Mailing Address 390 ADAMIC HILL RD

City

MILFORD

State

NJ

Zip Code

08848-1741

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27404296

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

DR ROBERT H H BATCHELOR

Mailing Address 12940 BOTTOM RD

City

HYDES

State

MD

Zip Code

21082-9732

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

VETERINARIAN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27404298

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 452 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN F KLEYLEIN

Mailing Address 1909 TROUT FARM RD

City

JARRETTSVILLE

State

MD

Zip Code

21084-2024

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

FISCAL ADMINISTRATOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27404300

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH USHER

Mailing Address 3808 S FORECASTLE AVE

City

WEST COVINA

State

CA

Zip Code

91792-3218

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27404408

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR A FLETCHER SISK, JR

Mailing Address 3009 LARKSPUR RUN

City

WILLIAMSBURG

State

VA

Zip Code

23185-3766

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

INS AGENT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27404453

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TIM A GIBSON

Mailing Address 704 LYNDAL ST

City

KINGSVILLE

State

TX

Zip Code

78363-6461

FEC ID number of contributing
federal political committee.

C

Name of Employer
US BORDER PATROL

Occupation

BORDER PATROL AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27404457

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID TANGEMAN

Mailing Address 2735 N COLFAX CIR

City

PLANO

State

TX

Zip Code

75075-3157

FEC ID number of contributing
federal political committee.

C

Name of Employer
BRINKS HOME SECURITY

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27404486

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID TANGEMAN

Mailing Address 2735 N COLFAX CIR

City

PLANO

State

TX

Zip Code

75075-3157

FEC ID number of contributing
federal political committee.

C

Name of Employer
BRINKS HOME SECURITY

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27404488

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RUDOLPH P NETZER

Mailing Address 8505 S 200 E

City

HAMLET

State

IN

Zip Code

46532-9672

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27404498

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE P HELMER

Mailing Address PO BOX 96

City

PALMETTO

State

FL

Zip Code

34220-0096

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27404566

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES N PEBERDY

Mailing Address 249 BROOK RD

City

BARNESVILLE

State

GA

Zip Code

30204-3371

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27404622

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PETER S WITTLINGER

Mailing Address 3886 W FIR AVE

City

FRESNO

State

CA

Zip Code

93711-0619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27404658

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

PAT CORRIGAN

Mailing Address 3645 90TH AVE

City

VERO BEACH

State

FL

Zip Code

32966-6661

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27404680

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

PAT CORRIGAN

Mailing Address 3645 90TH AVE

City

VERO BEACH

State

FL

Zip Code

32966-6661

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27404682

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 456 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RONALD BOYK

Mailing Address 1217 RIPLEY ST

City

PHILADELPHIA

State

PA

Zip Code

19111-2641

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY OF PHILADELPHIA

Occupation

BRIDGE INSPECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27404759

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES W ALLENDER

Mailing Address 8284 SNAIL RD SE

City

BERGHOLZ

State

OH

Zip Code

43908-9604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27404862

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR FRED C DYROFF

Mailing Address 1503 ALLEGHENY ST

City

JERSEY SHORE

State

PA

Zip Code

17740-1117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27404894

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 457 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDMOND BROWN

Mailing Address 1248 CHUCKANUT CREST LANE

City

BELLINGHAM

State

WA

Zip Code

98229-6914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	8

Transaction ID: 27404913

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN H HERSLOW

Mailing Address 1653 RAHWAY RD

City

SCOTCH PLAINS

State

NJ

Zip Code

07076-2715

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMPO SECURE LLC

Occupation

CHEMICAL ENGINEER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27404938

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN E MUSEY

Mailing Address 810 MEDWAY RD

City

HAGERSTOWN

State

MD

Zip Code

21740-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	8

Transaction ID: 27404948

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 458 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN P WHITAKER

Mailing Address 2415 BRIDGE AVE

City

DAVENPORT

State

IA

Zip Code

52803-1907

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27404954

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR JIMMY R ENZOR

Mailing Address 1370 SE 3RD TER

City

DEERFIELD BEACH

State

FL

Zip Code

33441-6735

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27404971

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR MAX L DUFENY, JR

Mailing Address 564 BOSPHOROUS AVE

City

TAMPA

State

FL

Zip Code

33606-3652

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27404993

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 459 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM J BERMAN

Mailing Address 12669 3RD ST

City

YUCAIPA

State

CA

Zip Code

92399-4508

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27405068

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR ROGER D D KUROWSKI

Mailing Address 7808 WAXWOOD DR

City

PORT RICHEY

State

FL

Zip Code

34668-2959

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Transaction ID: 27405075

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM A BAXLEY

Mailing Address PO BOX 2095

City

CROSS CITY

State

FL

Zip Code

32628-2095

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Transaction ID: 27405082

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 460 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GRANT H KITCHEN

Mailing Address 2921 ONAGON CIR

City

WATERFORD

State

MI

Zip Code

48328-3136

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27405091

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS EDNA W CRYAN

Mailing Address PO BOX 10633

City

FAIRBANKS

State

AK

Zip Code

99710-0633

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	8

Transaction ID: 27405100

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL D GORDON

Mailing Address 1219 STRATFORD AVE

City

PANAMA CITY

State

FL

Zip Code

32404-7335

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEBA

Occupation

MARINE ENGINEER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27405126

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 461 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WAYNE MCKAY

Mailing Address PO BOX 536

City

WAUPACA

State

WI

Zip Code

54981-0536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27405146

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES STEVENS

Mailing Address 26 BRINKER RD

City

BARRINGTON

State

IL

Zip Code

60010-4008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27405155

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

MR WALLACE R HARE

Mailing Address 406 ELY ST

City

WOODBINE

State

IA

Zip Code

51579-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27405168

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1325.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 462 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MILTON H PEARLMAN

Mailing Address 305 W JACKSON ST STE 302

City

CARBONDALE

State

IL

Zip Code

62901-1474

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	8

Transaction ID: 27405187

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR CARL W W ALLEN

Mailing Address 621 6TH ST

City

NEVADA

State

IA

Zip Code

50201-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer
IOWA DOT

Occupation

DESIGN TECH

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27405195

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN A HOTOPP

Mailing Address 1575 CLARK RD

City

CHARLESTON

State

WV

Zip Code

25314

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE LOUIS BERGER GROUP,
INC.

Occupation

ARCHAEOLOGIST

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27405213

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 463 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN E DAVIS

Mailing Address 926 POINT PHILLIPS RD

City
BATHState
PAZip Code
18014-9622FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHAMPTON COMMUNITY COL-
LEGEOccupation
RETIRED - COLLEGE PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	0	8

Transaction ID: 27405221

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT L HOLEM

Mailing Address 19134 W KELLY RD

City
LAKE VILLAState
ILZip Code
60046-9673FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF ILLINOISOccupation
RETIRED - STATE POLICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27405263

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

DR J L KIRKLAND, JR

Mailing Address 311 TURKEY CREEK

City
ALACHUAState
FLZip Code
32615-9355FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
RETIRED DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	8

Transaction ID: 27405275

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 464 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS A MCGILL

Mailing Address 8200 LAKEWOOD DR

City

CHEBOYGAN

State

MI

Zip Code

49721-8983

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27405290

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

DR MARK SHEILS

Mailing Address 1300 GATEWAY DR S

City

FARGO

State

ND

Zip Code

58103-3509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27405299

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR GILBERT S S MORAN

Mailing Address 12292 ASPEN LN

City

CUSTER

State

SD

Zip Code

57730-9206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27405324

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 465 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT B AUSTIN

Mailing Address 1508 YELLOWSTONE AVE

City

WORLAND

State

WY

Zip Code

82401-2207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27405335

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

W BRINKLEY

Mailing Address PO BOX 4365

City

HELENA

State

MT

Zip Code

59604-4365

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27405338

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR W C C MILLER

Mailing Address 310 SUGARWORTH MOUNTAIN RD

City

BOONE

State

NC

Zip Code

28607-9777

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27405342

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 466 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR HENRY I MOREHEAD

Mailing Address PO BOX 1726

City State Zip Code
POULSBO WA 98370-0228

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27405364

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)
MR TOMMY L WORD

Mailing Address 4300 NW 23RD AVE
SUITE 37

City State Zip Code
GAINESVILLE FL 32606-6541

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLORIDA CITIZENS BANK

Occupation
BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27405381

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)
MR THOMAS M MUNDAY

Mailing Address 7322 GRACE RD

City State Zip Code
ORLANDO FL 32819-7714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27405382

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 467 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDWARD P CASSELLA

Mailing Address 17 WISHING WELL RD

City

COLUMBIA

State

NJ

Zip Code

07832-2725

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27405460

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

L KIRK

Mailing Address 6 HUNTER DR

City

BEL AIR

State

MD

Zip Code

21014-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27405482

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS F F KINNEY

Mailing Address W4755 RIDGEVIEW RD

City

ELKHORN

State

WI

Zip Code

53121-2568

FEC ID number of contributing
federal political committee.

C

Name of Employer

MP PUMPS, INC

Occupation

REGIONAL SALES MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27405486

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 468 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

CAPT CHARLES S DAVIS, JR

Mailing Address PO BOX 442

City

RANCHESTER

State

WY

Zip Code

82839-0442

FEC ID number of contributing
federal political committee.

C

Name of Employer
EASTERN AIRLINES

Occupation
PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27405492

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR SAM WEAVER

Mailing Address 4 KIRKINTILLOCH DR

City

BELLA VISTA

State

AR

Zip Code

72715-4734

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27405556

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM A KURTZ

Mailing Address 433 DOVER AVE

City

LA GRANGE PARK

State

IL

Zip Code

60526-1706

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27405694

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

925.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WES JENKINS

Mailing Address 245 E 200 S

City

SALEM

State

UT

Zip Code

84653-9452

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27405710

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR LESLIE MAXWELL

Mailing Address 2513 EDGEMONT LN

City

NEDERLAND

State

TX

Zip Code

77627-4617

FEC ID number of contributing
federal political committee.

C

Name of Employer

SABINE PILOTS

Occupation

SHIP PILOT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

Transaction ID: 27405717

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

LEE SCHMIDT

Mailing Address 1719 1/2 ONTARIO AVE

City

SAVANNA

State

IL

Zip Code

61074-2410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

343.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27405718

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES F FROEMMING

Mailing Address PO BOX 6893

City

ROCKFORD

State

IL

Zip Code

61125-1893

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROCK VALLEY COLLEGE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27405720

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLIE AMARAL

Mailing Address 11223 PINE FOREST DR

City

NEW PORT RICHEY

State

FL

Zip Code

34654-1409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27405731

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD P BUECHLER

Mailing Address 701 S THRASHER WAY

City

ANAHEIM

State

CA

Zip Code

92807-4432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27405745

Amount of Each Receipt this Period

525.00

SUBTOTAL of Receipts This Page (optional)

655.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RUDOLPH J EICHENBERGER

Mailing Address PO BOX 9176

City

MAGNOLIA

State

AR

Zip Code

71754-9176

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27405772

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR RUDOLPH J EICHENBERGER

Mailing Address PO BOX 9176

City

MAGNOLIA

State

AR

Zip Code

71754-9176

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27405774

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR LESLIE STINSON, JR

Mailing Address 506 VERMONT ST

City

BETHALTO

State

IL

Zip Code

62010-1756

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27405779

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 472 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GREGORY M ROBERTSON

Mailing Address PO BOX 710041

City

SAN DIEGO

State

CA

Zip Code

92171-0041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27405789

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL B SKEFFINGTON

Mailing Address 1121 CENTER ST

City

DIXON

State

IL

Zip Code

61021-2323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27405797

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR JOSEPH E LINDENFELSER

Mailing Address 9687 RIDGEVIEW RD

City

BELVIDERE

State

IL

Zip Code

61008-8133

FEC ID number of contributing
federal political committee.

C

Name of Employer
LINDENFELSER, INC.

Occupation
SALES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27405811

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GORDON STRAHAN

Mailing Address PO BOX 12298

City

ZEPHYR COVE

State

NV

Zip Code

89448-4298

FEC ID number of contributing
federal political committee.

C

Name of Employer
G. STRAHAN & ASSOCIATES

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27405815

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

MR ALVIN LA MAR

Mailing Address 316 STEVENS ST

City

IOWA FALLS

State

IA

Zip Code

50126-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27405870

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT M HAINES

Mailing Address 3223 SUNCREST DR

City

DANVILLE

State

IL

Zip Code

61832-1329

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27405873

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ERNEST MORYAN

Mailing Address 26 MORRIS AVE

City

EDISON

State

NJ

Zip Code

08837-3021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27405883

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JONATHAN R HALLOCK

Mailing Address PO BOX 555

City

DOVER

State

TN

Zip Code

37058-0555

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27405893

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR TED LEBLANC

Mailing Address 10904 HIGHWAY 14

City

DELCAMBRE

State

LA

Zip Code

70528-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27405910

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 475 / 1300

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TED LEBLANC

Mailing Address 10904 HIGHWAY 14

City

DELCAMBRE

State

LA

Zip Code

70528-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27405917

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES M M HAMILTON

Mailing Address 2820 W MILL RD

City

EVANSVILLE

State

IN

Zip Code

47720-1130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27405971

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR ARLYN F TOPPERT

Mailing Address 25421 N 3000TH AVE

City

PROPHETSTOWN

State

IL

Zip Code

61277-8800

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27405985

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BRENT W BINGER

Mailing Address 101 HOLLY DR

City

TAYLORVILLE

State

IL

Zip Code

62568-9156

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27405999

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

COL E Y HOLT JR USMC RETIRED

Mailing Address 100 E OCEAN VIEW AVE APT 1103

City

NORFOLK

State

VA

Zip Code

23503-1635

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27406026

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR COLEMAN WORTHAM, III

Mailing Address 2301 MONUMENT AVE

City

RICHMOND

State

VA

Zip Code

23220-2603

FEC ID number of contributing
federal political committee.

C

Name of Employer

DAVENPORT & COMPANY, LLC

Occupation

PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406092

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 477 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE J BRECKENRIDGE

Mailing Address 303 E JAMES ST

City

YATES CITY

State

IL

Zip Code

61572-7504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27406103

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MS DORTHEA A COURTS

Mailing Address PO BOX 245

City

QUINTON

State

OK

Zip Code

74561-0245

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27406111

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES J CHRISTMAN

Mailing Address 3101 FERNWOOD AVE

City

ALTON

State

IL

Zip Code

62002-2929

FEC ID number of contributing
federal political committee.

C

Name of Employer

H L YOH

Occupation

DRAFTSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27406115

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD GILWORTH

Mailing Address 25751 CHERRY LN

City

JERSEYVILLE

State

IL

Zip Code

62052-6352

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27406119

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR RANDALL D D CROMER

Mailing Address 38 NEWMAN DR

City

AYLETT

State

VA

Zip Code

23009-2931

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27406148

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR RANDALL D D CROMER

Mailing Address 38 NEWMAN DR

City

AYLETT

State

VA

Zip Code

23009-2931

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406149

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RAFAEL LOPEZ

Mailing Address 25307 HERBERT WEIER DR

City

DEARBORN

State

MI

Zip Code

48128-1044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27406158

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR RAFAEL LOPEZ

Mailing Address 25307 HERBERT WEIER DR

City

DEARBORN

State

MI

Zip Code

48128-1044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27406159

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR KEITH R R BAILIE

Mailing Address 209 W REED ST

City

BENTON

State

IL

Zip Code

62812-1139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27406179

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR M C CANADAY

Mailing Address 14021 PRIM RD

City

KING GEORGE

State

VA

Zip Code

22485-3001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27406190

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD L KOCH

Mailing Address 8 LOMA DR

City

CAMARILLO

State

CA

Zip Code

93010-2316

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27406220

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN H HIGDON

Mailing Address PO BOX 540211

City

MERRITT ISLAND

State

FL

Zip Code

32954-0211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27406240

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 481 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT E BROOKER

Mailing Address 175 SCHOOL ST

City

MANCHESTER

State

MA

Zip Code

01944-1236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27406244

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD L CORRIGAN

Mailing Address 37179 DEVON WICK LN

City

PURCELLVILLE

State

VA

Zip Code

20132-5056

FEC ID number of contributing
federal political committee.

C

Name of Employer

CH2M HILL

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27406262

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR KEVIN FORDEN

Mailing Address 1715 E ANDREW RD

City

SPRINGFIELD

State

IL

Zip Code

62707-4595

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27406279

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

1570.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM L ELLISON

Mailing Address 3430 CANDLEOAK DR

City

SPRING

State

TX

Zip Code

77388-5211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27406294

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL T VARGO

Mailing Address 7114 FAIRWAY DR

City

BUTLER

State

PA

Zip Code

16001-8596

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27406298

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL L L REED

Mailing Address 3108 VERNE AVE

City

PORTSMOUTH

State

VA

Zip Code

23703-4734

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORFOLK NAVAL SHIPYARD

Occupation

METALLURGIST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27406324

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WAYNE E GRIFFITH

Mailing Address 1426 ADOBE RUN

City

SAN ANTONIO

State

TX

Zip Code

78232-4771

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	8

Transaction ID: 27406347

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

D M STEVENS

Mailing Address 315 FRESHWATER COVE LN

City

LOVINGSTON

State

VA

Zip Code

22949-2003

FEC ID number of contributing
federal political committee.

C

Name of Employer

DM STEVENS & ASSOC INC

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27406467

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR HERBERT O STRATTON

Mailing Address GENERAL DELIVERY

City

CEDAR RUN

State

PA

Zip Code

17727-9999

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

806.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27406602

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HERBERT O STRATTON

Mailing Address GENERAL DELIVERY

City

CEDAR RUN

State

PA

Zip Code

17727-9999

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

706.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406604

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

MR RANDALL D D CROMER

Mailing Address 38 NEWMAN DR

City

AYLETT

State

VA

Zip Code

23009-2931

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27406651

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES E MAYER

Mailing Address PO BOX 129

City

COBBS CREEK

State

VA

Zip Code

23035-0129

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANHEUSER BUSCH INC

Occupation
MAINT OVERHAUL FORMN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27406654

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN H PENCE, JR

Mailing Address 2320 KIPLING ST SW

City

ROANOKE

State

VA

Zip Code

24018-2126

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27406675

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN M JONES

Mailing Address 2480 PROPHECY RD

City

MIDDLESEX

State

NC

Zip Code

27557-8031

FEC ID number of contributing
federal political committee.

C

Name of Employer
US GOVT

Occupation

CIVIL SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406684

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES L HUGGINS

Mailing Address RR 1 BOX 142

City

PROCTOR

State

WV

Zip Code

26055-9612

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27406699

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CLARENCE R MATTHEY

Mailing Address RR 6 BOX 351

City

BUCKHANNON

State

WV

Zip Code

26201-8831

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406703

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR GARY D SCHULTZ

Mailing Address 14740 N SWAN RD

City

TUCSON

State

AZ

Zip Code

85739-8775

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406763

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR SHEPPARD W KELLY

Mailing Address 8029 WILSON TER

City

SPRINGFIELD

State

IL

Zip Code

62712-8952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27406768

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOSEPH ACAMPORA

Mailing Address 10485 E GRANDEUR DR

City

BATON ROUGE

State

LA

Zip Code

70815-4890

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406784

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

B CONKLIN

Mailing Address 17 STONE CREST CIR

City

MADISON

State

WI

Zip Code

53717-1320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27406792

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR DANNY L L KEATLEY

Mailing Address 622 GREENBRIER AVE

City

WHITE SULPHUR SPRI

State

WV

Zip Code

24986-2012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27406805

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 488 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FREEMAN W BOGGESS

Mailing Address 208 CEDAR LAKES DR

City

RIPLEY

State

WV

Zip Code

25271-1610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27406808

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR EDWARD W CHRISTOFFERS

Mailing Address 40 BROOKLAND CT

City

WETUMPKA

State

AL

Zip Code

36093

FEC ID number of contributing
federal political committee.

C

Name of Employer

NMFS

Occupation

ECOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27406816

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JACK L CALDWELL

Mailing Address 1555 GOUCHER SCHOOL RD

City

GAFFNEY

State

SC

Zip Code

29340-6034

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY OF CHARLOTTE NC

Occupation

FIREFIGHTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406856

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 489 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FREDERICK R R MASON

Mailing Address PO BOX 100

City

PROSPERITY

State

WV

Zip Code

25909-0100

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406893

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR SETH LOW

Mailing Address 4644 34TH ST S

City

ARLINGTON

State

VA

Zip Code

22206-1702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27406907

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

R JENSEN

Mailing Address 9042 HONEYBEE LN

City

JACKSONVILLE

State

FL

Zip Code

32256-9195

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406914

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 490 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RODNEY D HESSE

Mailing Address 1224 KELLY ISLAND RD

City

MARTINSBURG

State

WV

Zip Code

25405-2878

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHESSIE SYSTEM

Occupation

MACHINIST HELPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27406919

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN DETALVO

Mailing Address 1743 OLD MILL RD

City

WALL

State

NJ

Zip Code

07719-3767

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406932

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MIKE ECKHOUT

Mailing Address PO BOX 188

City

ARCADIA

State

MI

Zip Code

49613-0188

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27406947

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 491 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL J KELLY

Mailing Address 311 HOGAN ST

City

STARKVILLE

State

MS

Zip Code

39759-3323

FEC ID number of contributing
federal political committee.

C

Name of Employer
OMNOVA SOLUTIONS

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27406954

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

C J LOEHR

Mailing Address 1031 BAY CIR N

City

ORANGE PARK

State

FL

Zip Code

32073-4707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27406994

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR NEIL J STOUT

Mailing Address 8312 CARRLEIGH PKWY

City

SPRINGFIELD

State

VA

Zip Code

22152-1602

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27407046

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 492 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

B J HERRING

Mailing Address 12896 SE 91ST TERRACE RD

City

SUMMERFIELD

State

FL

Zip Code

34491-9788

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27407053

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

R V V EASTHAM

Mailing Address 502 SUMMERWOOD DR NE

City

ABINGDON

State

VA

Zip Code

24210-2308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27407166

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL TYLLICK

Mailing Address 6015 OGDEN FOREST DR

City

HOUSTON

State

TX

Zip Code

77088-2319

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27407172

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 493 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STEVE ROBINSON

Mailing Address PO BOX 2336

City

ROME

State

GA

Zip Code

30164-2336

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27407195

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

DR A S BITTNER

Mailing Address PO BOX 58

City

PARIS

State

ID

Zip Code

83261-0058

FEC ID number of contributing
federal political committee.

C

Name of Employer
COWBITS INC.

Occupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27407254

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR GREGORY M ROBERTSON

Mailing Address PO BOX 710041

City

SAN DIEGO

State

CA

Zip Code

92171-0041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27407282

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 494 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID GREEN

Mailing Address 2627 VARNER DR NE

City

ATLANTA

State

GA

Zip Code

30345-1558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	8

Transaction ID: 27407298

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES L ARNOLD

Mailing Address 3062 WENDMEAD PL

City

MARIETTA

State

GA

Zip Code

30062-1407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27407332

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR EDWIN C WEDDALL

Mailing Address 4706 105TH CT

City

URBANDALE

State

IA

Zip Code

50322-6312

FEC ID number of contributing
federal political committee.

C

Name of Employer
IMPACCOccupation
RISK MGT / ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Transaction ID: 27407355

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 495 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GARY L L KRETSINGER

Mailing Address 185 SLEDGE RD

City

BYRON

State

GA

Zip Code

31008-5415

FEC ID number of contributing
federal political committee.

C

Name of Employer
BLUE BIRD BODY CO

Occupation

PRODUCTION ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27407357

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

COL WILLIAM L DICKENS USMCR, RET

Mailing Address 1059 AUGUSTA ST

City

MOBILE

State

AL

Zip Code

36604-3042

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

REAL EST DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1206.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27407368

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

COL WILLIAM L DICKENS USMCR, RET

Mailing Address 1059 AUGUSTA ST

City

MOBILE

State

AL

Zip Code

36604-3042

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

REAL EST DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1212.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

Transaction ID: 27407370

Amount of Each Receipt this Period

6.00

SUBTOTAL of Receipts This Page (optional)

56.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 496 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
COL WILLIAM L DICKENS USMCR, RET

Mailing Address 1059 AUGUSTA ST

City State Zip Code
MOBILE AL 36604-3042

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
REAL EST DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1201.25

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 8

Transaction ID: 27407371

Amount of Each Receipt this Period

31.00

B.

Full Name (Last, First, Middle Initial)
COL WILLIAM L DICKENS USMCR, RET

Mailing Address 1059 AUGUSTA ST

City State Zip Code
MOBILE AL 36604-3042

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
REAL EST DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.25

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 8

Transaction ID: 27407373

Amount of Each Receipt this Period

6.00

C.

Full Name (Last, First, Middle Initial)
MR DON E ROGERS

Mailing Address 3902 GUNNIN RD

City State Zip Code
NORCROSS GA 30092-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer
GA INST. OF TECHNOLOGY

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27407392

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

287.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DANIEL P MCDONNELL

Mailing Address 4224 STONE MILL CT

City

AUGUSTA

State

GA

Zip Code

30907-1610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27407406

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

MR HOMER WINFREY

Mailing Address 968 CLOVER DEW DAIRY RD

City

PRINCETON

State

WV

Zip Code

24740-7064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	8

Transaction ID: 27407419

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

M E SHELBY

Mailing Address 752 HIGHWAY 109

City

WILSONVILLE

State

AL

Zip Code

35186-8600

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27407430

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 498 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JERRY L LUCKEY

Mailing Address 1019 TALLAPOOSA ST W

City

BREMEN

State

GA

Zip Code

30110-4707

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	8

Transaction ID: 27407449

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR PRESTON OBRAY

Mailing Address 5315 SILVER SPUR AVE

City

COLORADO SPRINGS

State

CO

Zip Code

80915-2423

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

RETIRED PLOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27407456

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR DONALD E CANTRELL

Mailing Address PO BOX 508

City

SULLIGENT

State

AL

Zip Code

35586-0508

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27407481

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 499 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM T COTTER

Mailing Address 604 HOLLY ST

City

BRUNSWICK

State

GA

Zip Code

31523-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTRAL HARDWAREOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27407514

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN L FENDER

Mailing Address 1040 CHRIS DALE DR

City

SEYMOUR

State

TN

Zip Code

37865-3208

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENNESSEE VALLEY AUTHORITYOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: 27407548

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR GENE O STOWELL

Mailing Address 16 MCDONALD ST

City

GLENS FALLS

State

NY

Zip Code

12801-3715

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 27407565

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 500 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JERRY W BRADBERRY

Mailing Address 1840 MOUNT ZION RD

City

MC MINNVILLE

State

TN

Zip Code

37110-6125

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27407609

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JOE D OZBOLT

Mailing Address 304 JESSE GREEN RD

City

EVA

State

AL

Zip Code

35621-8627

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27407649

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR MARK LAIMINGER

Mailing Address 11002 S HATCH RD

City

SPOKANE

State

WA

Zip Code

99224-8339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27407726

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 501 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BILLY JAQUES

Mailing Address 74 ROANOKE LN

City

ROCHESTER HILLS

State

MI

Zip Code

48309-1425

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27407745

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD F GUNTER

Mailing Address 405 GREAT OAKS RD

City

EADS

State

TN

Zip Code

38028-3644

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27407763

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES W KLEPPER

Mailing Address 316 BEECHWOOD DR

City

KNOXVILLE

State

TN

Zip Code

37920-5040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27407817

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 502 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM B STEPP

Mailing Address 806 ESSLINGER RD SE

City

HUNTSVILLE

State

AL

Zip Code

35802-3626

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27407823

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR SAMUEL R WASSON

Mailing Address 2638 SIERRA VISTA WAY

City

BISHOP

State

CA

Zip Code

93514-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27407840

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR EDWARD T T JOHNSON, JR

Mailing Address 144 ALGER RD

City

OAK RIDGE

State

TN

Zip Code

37830-5825

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOCKHEED MARTIN ENERGY SY-
STEMS

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27407898

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 503 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LAURANCE W WOLFE

Mailing Address 548 SNYDER RD

City

OAKLAND

State

MD

Zip Code

21550-2460

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27407921

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT A DOE

Mailing Address 235 N VINE ST

City

FOSTORIA

State

OH

Zip Code

44830-1751

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27407953

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT B B MARTIN

Mailing Address 57 SQUANNACOOK RD

City

SHIRLEY

State

MA

Zip Code

01464-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27407971

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 504 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KEN GRAY

Mailing Address PO BOX 278

City

COVINGTON

State

TN

Zip Code

38019-0278

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27407976

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR KEN GRAY

Mailing Address PO BOX 278

City

COVINGTON

State

TN

Zip Code

38019-0278

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27407977

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS P P DISIENO

Mailing Address 6041 KATIE EMMA DR

City

POWDER SPRINGS

State

GA

Zip Code

30127-8341

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCI TELECOMMUNICATIONS

Occupation
SENIOR FIELD ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27408041

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 505 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MILTON K JOHNSTON, JR

Mailing Address 1341 DAPHNE LN NW

City

ACWORTH

State

GA

Zip Code

30101-7872

FEC ID number of contributing
federal political committee.

C

Name of Employer
US GOVERNMENT

Occupation

CIVIL SERVANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27408061

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR RANDY C VILINES

Mailing Address 1176 STATE ROUTE 132 W

City

DIXON

State

KY

Zip Code

42409-9668

FEC ID number of contributing
federal political committee.

C

Name of Employer
BELLSOUTH

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27408071

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS J GOLDEN, JR

Mailing Address 3587 COLEMAN AVE

City

MEMPHIS

State

TN

Zip Code

38122-3459

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27408078

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 506 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT M CRITES

Mailing Address 1030 S GRAND TRAVERSE ST

City

FLINT

State

MI

Zip Code

48502-1092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27408083

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR EARL R HARRISON, JR

Mailing Address 13300 RIVER RD

City

HAVRE

State

MT

Zip Code

59501-8210

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	8

Transaction ID: 27408133

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN R WRIGHT, JR

Mailing Address 420 SUMMER HILL RD

City

MADISON

State

MS

Zip Code

39110-8572

FEC ID number of contributing
federal political committee.

C

Name of Employer
MS. STATE TAX COMMISSION

Occupation

CRIMINAL INVESTIGATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27408156

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 507 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PATRICK NEWMAN

Mailing Address 1427 SALE AVE

City

LOUISVILLE

State

KY

Zip Code

40215-1908

FEC ID number of contributing
federal political committee.

C

Name of Employer
RELIANCE UNIV

Occupation
LAB TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27408214

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR PATRICK NEWMAN

Mailing Address 1427 SALE AVE

City

LOUISVILLE

State

KY

Zip Code

40215-1908

FEC ID number of contributing
federal political committee.

C

Name of Employer
RELIANCE UNIV

Occupation
LAB TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27408216

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR ELDON ENGLAND

Mailing Address 214 HONEY HILL LOOP

City

SEARCY

State

AR

Zip Code

72143-9393

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27408231

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JERRY W W GREGORY

Mailing Address 5035 TURNERTOWN RD

City

FRANKLIN

State

KY

Zip Code

42134-5925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27408241

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR JEFFREY W GILLESPIE

Mailing Address 803 BLUEGRASS AVE

City

RUSSELLVILLE

State

KY

Zip Code

42276-1011

FEC ID number of contributing
federal political committee.

C

Name of Employer

TIL FABCO

Occupation

MATERIALS HANDLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27408269

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN P TAWES

Mailing Address 3823 RAINFOREST CIR

City

NORCROSS

State

GA

Zip Code

30092-2347

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27408285

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ANTHONY RAPISARDI

Mailing Address 1924 61ST ST

City

BROOKLYN

State

NY

Zip Code

11204-2329

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

INSURANCE CLAIM APPRAISER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27408293

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR HERBERT F CLARK, II

Mailing Address 133 NEW HARRISON BRIDGE RD

City

SIMPSONVILLE

State

SC

Zip Code

29680-7018

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLUOR

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1499.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27408403

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR NORMAN L DAVIDS

Mailing Address 910 DIRKSLAND ST

City

COLORADO SPRINGS

State

CO

Zip Code

80907-3918

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27408427

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR W P STEELE

Mailing Address 336 HOLLYBROOK DR

City

ADVANCE

State

NC

Zip Code

27006-8405

FEC ID number of contributing
federal political committee.

C

Name of Employer
PINE HALL BRICK & PUPE CO

Occupation
CORP EXE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27408504

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH TRUMPORE

Mailing Address 201 MAXIM DR

City

HOPATCONG

State

NJ

Zip Code

07843-1913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27408506

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

E R ALLEN

Mailing Address 10494 BONWELL LOOP

City

KOUNTZE

State

TX

Zip Code

77625-6033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27408517

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 511 / 1300
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHNNY JACOBS

Mailing Address PO BOX 219

City

CRESCENT CITY

State

CA

Zip Code

95531-0219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27408542

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR WELDON HOPMAN

Mailing Address 2700 W PEMBERTON DR

City

PRESCOTT

State

AZ

Zip Code

86305-8585

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27408551

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR RONNIE D D FLOYD

Mailing Address 15314 SPRING FLS

City

SAN ANTONIO

State

TX

Zip Code

78247-5407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: 27408575

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 512 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MS MARIETTA CRANE

Mailing Address 355 BUENA VISTA AVE E UNIT 213

City

SAN FRANCISCO

State

CA

Zip Code

94117-4173

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27408590

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR RALPH WORTHYLAKE

Mailing Address 506 VINCENT AVE

City

CENTRAL POINT

State

OR

Zip Code

97502-1798

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27408599

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN S JENDRUSIK

Mailing Address 55391 MAPLE HTS

City

BRIDGEPORT

State

OH

Zip Code

43912-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27408632

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

445.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR K C WALDO, JR

Mailing Address 1000 DEERFIELD RD

City

RALEIGH

State

NC

Zip Code

27609-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHERWIN WILLIAMS

Occupation
CHEMIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27408647

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

MR K C WALDO, JR

Mailing Address 1000 DEERFIELD RD

City

RALEIGH

State

NC

Zip Code

27609-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHERWIN WILLIAMS

Occupation
CHEMIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27408649

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

MR K C WALDO, JR

Mailing Address 1000 DEERFIELD RD

City

RALEIGH

State

NC

Zip Code

27609-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHERWIN WILLIAMS

Occupation
CHEMIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27408650

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JON D SELLS

Mailing Address 2678 REDBUD RD

City

DEXTER

State

KY

Zip Code

42036-9353

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27408667

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR PAUL J BLEISTEIN

Mailing Address 695 E 260TH ST

City

EUCLID

State

OH

Zip Code

44132-2330

FEC ID number of contributing
federal political committee.

C

Name of Employer
PICKER INTNL

Occupation

Q A ENGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27408704

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR ERNEST H HUMBERGER

Mailing Address 8547 ARQUETTE RD

City

OREGON

State

OH

Zip Code

43618-9646

FEC ID number of contributing
federal political committee.

C

Name of Employer
STANDARD DIESEL INC

Occupation

MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27408749

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT E FELLERS

Mailing Address 1210 RANKIN DR

City

ZANESVILLE

State

OH

Zip Code

43701-1459

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27408754

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR EMERY S ROSE

Mailing Address 245 OLD MILL RD

City

MANHASSET

State

NY

Zip Code

11030-3438

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27408763

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)

MR JOEL D JONES

Mailing Address PO BOX 944

City

WINNFIELD

State

LA

Zip Code

71483-0944

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27408767

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LINN R PERRY

Mailing Address 404 VISTA DR

City

MURRELLS INLET

State

SC

Zip Code

29576-9028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27408777

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID L L MCCONNELL

Mailing Address 768 OAKRIDGE DR

City

BOARDMAN

State

OH

Zip Code

44512-3547

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHEM & LUBE

Occupation

SALES ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27408826

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR K M M FOOS

Mailing Address 3516 WOODS DR

City

RICHMOND

State

IN

Zip Code

47374-2547

FEC ID number of contributing
federal political committee.

C

Name of Employer
INDIANA UNIVERSITY

Occupation

PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27408854

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR W P STEELE

Mailing Address 336 HOLLYBROOK DR

City

ADVANCE

State

NC

Zip Code

27006-8405

FEC ID number of contributing
federal political committee.

C

Name of Employer
PINE HALL BRICK & PUPE CO

Occupation
CORP EXE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27408919

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES V GAINES

Mailing Address 1764 WOODBINE DR

City

BIRMINGHAM

State

AL

Zip Code

35216-1637

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27408956

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES C BROWN

Mailing Address 302 BRISTOL CHAMPION TOWNLIN

City

WARREN

State

OH

Zip Code

44481-9404

FEC ID number of contributing
federal political committee.

C

Name of Employer
PACKARD ELECTRIC DIV GM

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27409073

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 518 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WARREN GHENS

Mailing Address 7766 N CARNEGIE AVE

City

FRESNO

State

CA

Zip Code

93722-2229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27409107

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR JERALD M CRUM

Mailing Address 3251 MAPLEGROVE AVE

City

LOUISVILLE

State

OH

Zip Code

44641-9687

FEC ID number of contributing
federal political committee.

C

Name of Employer
KIKO MEATS

Occupation

MEAT MARKET

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27409122

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN H TAYLOR

Mailing Address 2820 PORTSMOUTH LN

City

LAKE CHARLES

State

LA

Zip Code

70615-3135

FEC ID number of contributing
federal political committee.

C

Name of Employer
GULF STATES UTILITIES

Occupation

F H OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27409133

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 519 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL J DWYER

Mailing Address 9809 WINDALE FARMS CIR

City

GALENA

State

OH

Zip Code

43021-9609

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRITTER CONTROL INC.

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27409206

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM SCOTT

Mailing Address 711 LAKEHALL RD

City

LAKE VILLAGE

State

AR

Zip Code

71653-6093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27409283

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR ROGER C MCKEE

Mailing Address 4881 MOUNT ALIFAN DR

City

SAN DIEGO

State

CA

Zip Code

92111-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27409291

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 520 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR IRA P TUVELL

Mailing Address 3422 BLOCKER DR

City

KETTERING

State

OH

Zip Code

45420-1016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Transaction ID: 27409315

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN INNES

Mailing Address 35205 POPLAR NECK RD

City

PITTSVILLE

State

MD

Zip Code

21850-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: 27409326

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR WAYNE HAYES

Mailing Address PO BOX 71

City

GRAY HAWK

State

KY

Zip Code

40434-0071

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARRISON RADIATOR

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: 27409350

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 521 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN C WILLS

Mailing Address 677 RIDDLE RD

City

CINCINNATI

State

OH

Zip Code

45220-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27409353

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR MACKEY MCENTIRE

Mailing Address PO BOX 747

City

STERLING CITY

State

TX

Zip Code

76951-0747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27409365

Amount of Each Receipt this Period

275.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM H BAKER

Mailing Address 314 GREENLAWN AVE

City

FINDLAY

State

OH

Zip Code

45840-5122

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDISON STATE COMMUNITY CO-
LLEGE

Occupation

PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27409414

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 522 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR NORMAN G KOSTER

Mailing Address 8701 MAYFIELD RD LOT 151

City

CHESTERLAND

State

OH

Zip Code

44026-2660

FEC ID number of contributing
federal political committee.

C

Name of Employer
PARK OHIO

Occupation

MACHINIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27409508

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JACK L HISEY

Mailing Address 8966 GEORGETOWN ST

City

LOUISVILLE

State

OH

Zip Code

44641-9665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27409552

Amount of Each Receipt this Period

34.00

C.

Full Name (Last, First, Middle Initial)

MR DOUGLAS W RICHARD

Mailing Address 320 BROWN AVE

City

COLLINSVILLE

State

IL

Zip Code

62234-4001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27409568

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

164.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 523 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR A J WRAPE, III

Mailing Address 3071 MUIRFIELD RD

City

CENTER VALLEY

State

PA

Zip Code

18034-8951

FEC ID number of contributing
federal political committee.

C

Name of Employer
PPL INC

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27409586

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR CHESTER A LUCKENBAUGH, II

Mailing Address 219 ANDREWS LN

City

NEW CARLISLE

State

OH

Zip Code

45344-9202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27409617

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR AL LILLA

Mailing Address 2530 OPPIO ST

City

SPARKS

State

NV

Zip Code

89431-1930

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27409659

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

645.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 524 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LEWIS G PLACE

Mailing Address 12150 SPENCERVILLE DELPHOS RD

City

DELPHOS

State

OH

Zip Code

45833-9219

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN ELECTRIC POWEROccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27409694

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR LEWIS G PLACE

Mailing Address 12150 SPENCERVILLE DELPHOS RD

City

DELPHOS

State

OH

Zip Code

45833-9219

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN ELECTRIC POWEROccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27409696

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD M FALLOWFIELD

Mailing Address 3224 GRAVELIE DR

City

INDIANAPOLIS

State

IN

Zip Code

46227-7845

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAOccupation
FABRICATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27409714

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 525 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MS SANDRA FROMAN

Mailing Address PO BOX 36228

City

TUCSON

State

AZ

Zip Code

85740-6228

FEC ID number of contributing
federal political committee.

C

Name of Employer
SANDRA S. FROMAN, P.L.C.

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 8

Transaction ID: 27409755

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR RALPH M LOEHMER

Mailing Address 3403 E 600 N

City

MONTEREY

State

IN

Zip Code

46960-9270

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27409775

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT V WILSON

Mailing Address 1135 STATE ROUTE 38 SE

City

LONDON

State

OH

Zip Code

43140-9217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27409781

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

1345.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 526 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HARLEY B GUYNN

Mailing Address 1052 SHADOW LAWN ST

City

INDIANAPOLIS

State

IN

Zip Code

46260-2231

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27409798

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID L L CRIPE

Mailing Address 4545 E 1000 S

City

CLAYPOOL

State

IN

Zip Code

46510-9615

FEC ID number of contributing
federal political committee.

C

Name of Employer
RR DONNELLEY & SONSOccupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27409817

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR R W POORMAN

Mailing Address 1828 LAWNDAL DR

City

FORT WAYNE

State

IN

Zip Code

46805-3653

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27409825

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 527 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT E RICHARDS

Mailing Address 975 N GRAHAM AVE

City

INDIANAPOLIS

State

IN

Zip Code

46219-4537

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27409865

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

MR JEFFREY D KUSS

Mailing Address 466 E DIVISION RD

City

VALPARAISO

State

IN

Zip Code

46383-9314

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27409879

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MIKE COLLIER

Mailing Address 4460 W OLD TR RD

City

COLUMBIA CITY

State

IN

Zip Code

46725-9715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27409931

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 528 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JIM POLLEY

Mailing Address 1408 OAK MNR

City

BEDFORD

State

IN

Zip Code

47421-2741

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS

Occupation

ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27409957

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID KELCE

Mailing Address 1115 BAYSHORE DR

City

ENGLEWOOD

State

FL

Zip Code

34223-4607

FEC ID number of contributing
federal political committee.

C

Name of Employer
DIGITAL ELECTRONIC SYSTEMS
INC

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27409971

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN R ROTH

Mailing Address 120 ALOE LN

City

JACKSON

State

MO

Zip Code

63755-7262

FEC ID number of contributing
federal political committee.

C

Name of Employer
WESTERN SUPPLIES CO

Occupation

DIE MAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27410097

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 529 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TIM J MULLIN

Mailing Address 7162 DELMAR BLVD

City

SAINT LOUIS

State

MO

Zip Code

63130-4303

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27410172

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL L L NORTH

Mailing Address 9433 US HIGHWAY 6

City

BRYAN

State

OH

Zip Code

43506-9516

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHASE BRASS & COPPER COOccupation
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27410180

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL L L NORTH

Mailing Address 9433 US HIGHWAY 6

City

BRYAN

State

OH

Zip Code

43506-9516

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHASE BRASS & COPPER COOccupation
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27410187

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 530 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PHILLIP D MCMURPHY

Mailing Address 484 NW STATE ROUTE 13

City

WARRENSBURG

State

MO

Zip Code

64093-7493

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27410214

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR GARY BROOKS

Mailing Address 622 E WOOD ST

City

PARIS

State

IL

Zip Code

61944-1957

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27410258

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MERLE D STROWMATT

Mailing Address PO BOX 82

City

VERSAILLES

State

MO

Zip Code

65084-0082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27410298

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 531 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES H OVERSTREET

Mailing Address 494 CALERO AVE

City

SAN JOSE

State

CA

Zip Code

95123-4211

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27410319

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR B J FOUST

Mailing Address 340 OTTO LN

City

CAPE GIRARDEAU

State

MO

Zip Code

63701-9524

FEC ID number of contributing
federal political committee.

C

Name of Employer
WETTERAU INC

Occupation
MAINT MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27410328

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR BRIAN WALKER

Mailing Address 1424 COUNTY ROAD 36

City

NORWICH

State

NY

Zip Code

13815-3446

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEADWEST VACO

Occupation
STOCK CHASER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27410369

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 532 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN A JONES, JR

Mailing Address PO BOX 567

City

SILVER SPRINGS

State

FL

Zip Code

34489-0567

FEC ID number of contributing
federal political committee.

C

Name of Employer
USDA

Occupation

VETERINARIAN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27410412

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR BILL ARENDT

Mailing Address 3906 FOXCREEK WAY

City

COLUMBIA

State

MO

Zip Code

65203-8855

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation

REAL ESTATE MGT.

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27410472

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MRS CANDY FARWELL

Mailing Address 1101 ROAD 18

City

POWELL

State

WY

Zip Code

82435-8813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27410490

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional)

545.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 533 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STEPHEN C CROOKS

Mailing Address 5000 SNOWBERRY ST

City

IMPERIAL

State

MO

Zip Code

63052-1548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27410582

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR MARK S LEVEY

Mailing Address 574 W HAWTHORNE PL

City

CHICAGO

State

IL

Zip Code

60657-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOTSOFF CAPITAL MANAGEMENT

Occupation

INVESTMENT MGMT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	8

Transaction ID: 27410635

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DEWEY L SCOTT

Mailing Address 4708 BLACKHAWK DR

City

AFFTON

State

MO

Zip Code

63123-5702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27410673

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM R R SHANER

Mailing Address 92 LEWISVILLE RD

City

NEW LONDON TOWNSHI

State

PA

Zip Code

19352-1123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27410685

Amount of Each Receipt this Period

275.00

B.

Full Name (Last, First, Middle Initial)

MR DANNY MAIER

Mailing Address 869 CONTINENTAL CT APT 4

City

VANDALIA

State

OH

Zip Code

45377-1235

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.39

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27410747

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR CLARENCE G BENNETT

Mailing Address 114 COUNTY ROAD 4251

City

NEW SITE

State

MS

Zip Code

38859-8518

FEC ID number of contributing
federal political committee.

C

Name of Employer
BOILERMAKER LOCAL

Occupation

BOILERMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27410764

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 535 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN L GERMANN

Mailing Address 7107 EASTERN AVE

City

KANSAS CITY

State

MO

Zip Code

64133-6230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27410804

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR DANIEL G MACKEY

Mailing Address 1121 STRATFORD DR

City

RICHARDSON

State

TX

Zip Code

75080-2916

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27410817

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

DR STEVEN J MOORE

Mailing Address 20181 HILLSIDE DR

City

ORANGE

State

CA

Zip Code

92869-1647

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27410843

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 536 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

ANDRE J CORMIER

Mailing Address PO BOX 154

City

STURBRIDGE

State

MA

Zip Code

01566-0154

FEC ID number of contributing
federal political committee.

C

Name of Employer
ESCAPE ESTATES INC

Occupation

GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	8

Transaction ID: 27410913

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR HOWARD BRODT

Mailing Address 66 VILLA DR

City

PUEBLO

State

CO

Zip Code

81001-1419

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27410927

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DAN LAWSON

Mailing Address PO BOX 847

City

PLATTEVILLE

State

CO

Zip Code

80651-0847

FEC ID number of contributing
federal political committee.

C

Name of Employer
QWEST COMMUNICATIONS INC.

Occupation

TECH SUPPORT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: 27410973

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 537 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LAWRENCE H TROTTER

Mailing Address 908 LITTLE DOGWOOD RD

City

KINGSTON

State

TN

Zip Code

37763-5602

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONTINENTAL MACHINE

Occupation

RETIRED MACHINIST MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1630.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27411009

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MS GERALDINE CYGAN

Mailing Address 549 SANDPIPER DR

City

PRESCOTT

State

AZ

Zip Code

86303-5730

FEC ID number of contributing
federal political committee.

C

Name of Employer
NOT EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	8

Transaction ID: 27411019

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR NEAL S ROSS

Mailing Address 54 CHURCH LN

City

MIDDLE ISLAND

State

NY

Zip Code

11953-1708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27411056

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

580.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR NEAL S ROSS

Mailing Address 54 CHURCH LN

City

MIDDLE ISLAND

State

NY

Zip Code

11953-1708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27411057

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MRS MARY A CARTER

Mailing Address 2671 3RD AVE N

City

CLEARWATER

State

FL

Zip Code

33759-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27411113

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

MR MIKEL D JOHNSON

Mailing Address 1916 COLFAX AVE S APT 3

City

MINNEAPOLIS

State

MN

Zip Code

55403-3030

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLARK CONSULTING

Occupation
PARALEGAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27411160

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 539 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MARSHALL STEPHENS

Mailing Address 1390 N IVY ST

City

STEPHENVILLE

State

TX

Zip Code

76401-2716

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARDY TIDWELL

Occupation

SERVICE PERSON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27411174

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN REEHING

Mailing Address 1408 CARTER PL

City

WEST CHESTER

State

PA

Zip Code

19382-7770

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONRAIL

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27411207

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR MARK A TALLMAN

Mailing Address 3184 EPWORTH AVE

City

CINCINNATI

State

OH

Zip Code

45211-7011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27411247

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD RADER

Mailing Address 440 E CENTER ST

City

IVINS

State

UT

Zip Code

84738-5045

FEC ID number of contributing
federal political committee.

C

Name of Employer
IHC

Occupation

REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27411259

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES BLOCKER

Mailing Address 5855 HARPER RD

City

KEITHVILLE

State

LA

Zip Code

71047-7931

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27411262

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES GOODING

Mailing Address 3932 W GELDING DR

City

PHOENIX

State

AZ

Zip Code

85053-5457

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27411272

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MELTON E TRACHTA

Mailing Address 131 W ROSEWOOD AVE

City

SAN ANTONIO

State

TX

Zip Code

78212-2330

FEC ID number of contributing
federal political committee.

C

Name of Employer
ORION PARTNERS, INC.

Occupation

PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27411328

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR PHILLIP QUIMET

Mailing Address 511 NEWTON AVE

City

SAULT SAINTE MARIE

State

MI

Zip Code

49783-3139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27411370

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR RICK KUEHN

Mailing Address 4264 SE 122ND AVE UNIT 5

City

PORTLAND

State

OR

Zip Code

97236-3700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27411387

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 542 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ARTHUR A LEVASSEUR

Mailing Address 3855 POST RD

City

MELBOURNE

State

FL

Zip Code

32934-8424

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27411388

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR ANTHONY GORRO

Mailing Address 27245 SPRING ARBOR DR

City

SOUTHFIELD

State

MI

Zip Code

48076-3542

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	8

Transaction ID: 27411401

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR ANTHONY GORRO

Mailing Address 27245 SPRING ARBOR DR

City

SOUTHFIELD

State

MI

Zip Code

48076-3542

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27411402

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 543 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS YORK

Mailing Address 3083 W NORTHSHORE DR-57 # 57

City

COLUMBIA CITY

State

IN

Zip Code

46725-9469

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEIJER PHARMACY

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27411446

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

LYNN STEELE

Mailing Address PO BOX 86

City

MIDDLETOWN

State

MO

Zip Code

63359-0086

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

VETERINARIAN FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27411472

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DENNIS QUINN

Mailing Address 119 COSTANZA DR

City

MARTINEZ

State

CA

Zip Code

94553-6625

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN FRAN POLICE DEPT.

Occupation

POLICE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27411481

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

JESSE C GIDEON

Mailing Address 5200 COUNTY ROAD 316

City

ALVARADO

State

TX

Zip Code

76009-8445

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27411498

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS MARJORIE A SEIBOLD

Mailing Address 66 SUNNY RIDGE RD

City

EASTON

State

CT

Zip Code

06612-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27411554

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR RICKEY R GHOLSON

Mailing Address 31715 FULSHEAR CREEK TRL

City

FULSHEAR

State

TX

Zip Code

77441-4195

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27411605

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 545 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JEROME B MYERS

Mailing Address 5305 S RUNNING BROOK DR

City

HOMOSASSA

State

FL

Zip Code

34448-3777

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27411612

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR RUSS TAYLOR

Mailing Address 1304 WOODLAND CT

City

MAHOMET

State

IL

Zip Code

61853-9169

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27411660

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DEAN H HALL

Mailing Address 4566 CHASE OAK CT

City

ZIONSVILLE

State

IN

Zip Code

46077-9652

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRIMARY ENERGY, INC

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27411680

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 546 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ANTHONY PLACANICO

Mailing Address 28 OGDEN ST

City

CHICOPEE

State

MA

Zip Code

01013-1116

FEC ID number of contributing
federal political committee.

C

Name of Employer
HAMPDEN COUNTRY CLUB

Occupation

GROUNDS MAINTENANCE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27411698

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MS MARY A GENTRY

Mailing Address 57 COUNTY ROAD 118

City

ESPANOLA

State

NM

Zip Code

87532-3124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27411732

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

JAN ARDREY

Mailing Address 18124 WEDGE PKWY # 415

City

RENO

State

NV

Zip Code

89511-8134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27411773

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

JAN ARDREY

Mailing Address 18124 WEDGE PKWY # 415

City

RENO

State

NV

Zip Code

89511-8134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27411774

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR DANIEL A WEISS

Mailing Address 53105 BOSTON RD

City

JERUSALEM

State

OH

Zip Code

43747-9631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27411780

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN I FISHER

Mailing Address 11415 RED ROCK RD

City

OKLAHOMA CITY

State

OK

Zip Code

73120-5344

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27411791

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 548 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GARY DOEMELT

Mailing Address PO BOX 157

City

ARCOLA

State

IL

Zip Code

61910-0157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27411815

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR VANCE BURNETT

Mailing Address 9 CRABTREE CT

City

FARMER CITY

State

IL

Zip Code

61842-9756

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27411881

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR RAFAEL CORONADO

Mailing Address 2242 CANTERA CIR

City

EAGLE PASS

State

TX

Zip Code

78852-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer

EAGLE PASS SCHOOL DISTRICT

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27411887

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 549 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JIM NOENNIG

Mailing Address 93 NORMANDY RD

City

FORDLAND

State

MO

Zip Code

65652-7118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27411903

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR BRUCE BREM

Mailing Address 524 STAPLES ST

City

FARMINGDALE

State

NY

Zip Code

11735-4107

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPELLMAN HIGH VOLTAGE

Occupation

ELECTRONIC ASSEMBLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27412001

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR PEYTON S CARNES, JR

Mailing Address 2044 PEACHTREE LN

City

WICHITA FALLS

State

TX

Zip Code

76308-3822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27412012

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FREDERICK CARPENTER

Mailing Address 516 RUDISILL RD

City

LINCOLNTON

State

NC

Zip Code

28092-6244

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27412039

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES EVANS

Mailing Address PO BOX 594

City

PLATTEKILL

State

NY

Zip Code

12568-0594

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALLBELL CENTRAL SCHOOL
DIST

Occupation
HEAD OF MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27412062

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES EVANS

Mailing Address PO BOX 594

City

PLATTEKILL

State

NY

Zip Code

12568-0594

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALLBELL CENTRAL SCHOOL
DIST

Occupation
HEAD OF MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27412064

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES EVANS

Mailing Address PO BOX 594

City

PLATTEKILL

State

NY

Zip Code

12568-0594

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALLBELL CENTRAL SCHOOL
DIST

Occupation

HEAD OF MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27412065

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JOSEPH T MCGRATH

Mailing Address 800 MAXWELL PL

City

LANSDALE

State

PA

Zip Code

19446-5521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27412078

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR MAURI K HAMPTON

Mailing Address 5501 SEMINARY RD APT 2310S

City

FALLS CHURCH

State

VA

Zip Code

22041-3912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27412109

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BOBBY CHRISCOE, JR

Mailing Address 4723 FORK CREEK MILL RD

City

SEAGROVE

State

NC

Zip Code

27341-8150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27412113

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR BOBBY CHRISCOE, JR

Mailing Address 4723 FORK CREEK MILL RD

City

SEAGROVE

State

NC

Zip Code

27341-8150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27412116

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID ZUBER

Mailing Address 1918 HARRISON AVE UNIT 4

City

CENTRALIA

State

WA

Zip Code

98531-9389

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27412121

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HOWARD KOEHL

Mailing Address 8817 DEWEY DR

City

LAFAYETTE

State

IN

Zip Code

47905-9477

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27412176

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR RONALD L HOOSER

Mailing Address 68 N BRADLEY FOSTER DR

City

HUNTINGTON

State

WV

Zip Code

25701-9457

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27412185

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR CLARENCE LA LIBERTE

Mailing Address 2712 E 5TH ST

City

DULUTH

State

MN

Zip Code

55812-1537

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27412215

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TOD EARLY

Mailing Address 1801 MORA LN

City

LAS VEGAS

State

NV

Zip Code

89102-2040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27412240

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES SCHMIDT

Mailing Address PO BOX 1221

City

ANDERSON

State

MO

Zip Code

64831-1221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27412254

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR BOB E WHITE

Mailing Address 3315 33RD AVENUE COURT

City

GREELEY

State

CO

Zip Code

80634-9437

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27412264

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 555 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STEVEN LAW

Mailing Address 18 COLDSTREAM LN

City

WORTHINGTON

State

WV

Zip Code

26591

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27412324

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR SEAN OAKLEY

Mailing Address 3911 ALBANY ST

City

SCHENECTADY

State

NY

Zip Code

12304-4598

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27412331

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

HELM SEXTON

Mailing Address 721 LINCOLN AVE

City

MORRISTOWN

State

TN

Zip Code

37813-5618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27412332

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD W BERGHORN

Mailing Address 42 APPIAN DR

City

ROCHESTER

State

NY

Zip Code

14606-4721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27412338

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM MEEHAN

Mailing Address 1 BLACKTHORN PL

City

MANCHESTER

State

NJ

Zip Code

08759-6656

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27412340

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES KITTELL

Mailing Address 121 VANDERFORD RD N

City

ORANGE PARK

State

FL

Zip Code

32073-5969

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Transaction ID: 27412375

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBB C MINOR

Mailing Address 312 CHERYL AVE

City

LOS ALAMOS

State

NM

Zip Code

87544-3610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.32

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27412480

Amount of Each Receipt this Period

45.42

B.

Full Name (Last, First, Middle Initial)

MR CHARLES WILKINSON

Mailing Address 1726 KINGS CT

City

GROVETOWN

State

GA

Zip Code

30813-4531

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27412512

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID WEBB

Mailing Address 1060 GARRISON RIDGE BLVD

City

KNOXVILLE

State

TN

Zip Code

37922-5155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27412526

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

495.42

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 558 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GARY GREENLAND

Mailing Address 1508 FILBERT ST

City

YORK

State

PA

Zip Code

17404-5202

FEC ID number of contributing
federal political committee.**C**Name of Employer
F & S TRANSPORTATION, INC.

Occupation

BOOKKEEPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: 27412540

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR MITCHELL MANDURANO

Mailing Address 29 BIRCH LN APT 18E

City

OSWEGO

State

NY

Zip Code

13126-4303

FEC ID number of contributing
federal political committee.**C**Name of Employer
ENTERGY NUCLEAR NORTHEAST

Occupation

BUILDING/GROUNDS ATTENDANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	1	/	2	0	0	8

Transaction ID: 27412544

Amount of Each Receipt this Period

16.00

C.

Full Name (Last, First, Middle Initial)

MR MITCHELL MANDURANO

Mailing Address 29 BIRCH LN APT 18E

City

OSWEGO

State

NY

Zip Code

13126-4303

FEC ID number of contributing
federal political committee.**C**Name of Employer
ENTERGY NUCLEAR NORTHEAST

Occupation

BUILDING/GROUNDS ATTENDANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	8

Transaction ID: 27412547

Amount of Each Receipt this Period

7.00

SUBTOTAL of Receipts This Page (optional)

93.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 559 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE BLACK

Mailing Address 376 RAINIER VIEW LN NE

City

MOSES LAKE

State

WA

Zip Code

98837-9495

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27412551

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR FRANK CICATIELLO

Mailing Address 4934 WOODLAND FORREST DR

City

TUSCALOOSA

State

AL

Zip Code

35405-5762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27412557

Amount of Each Receipt this Period

325.00

C.

Full Name (Last, First, Middle Initial)

MR MARLON TAYLOR

Mailing Address 15805 NE 79TH ST

City

VANCOUVER

State

WA

Zip Code

98682-1543

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARLON TAYLOR CONSTRUCTION
INC

Occupation
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27412575

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 560 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR J MORRIS

Mailing Address 1801 SYCAMORE VALLEY DR APT 20

City

RESTON

State

VA

Zip Code

20190-4569

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHROP GRUMMAN

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27412579

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS M WALKER

Mailing Address PO BOX 176

City

AVON

State

MA

Zip Code

02322-0176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27412581

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR EUGENE ANDERSON

Mailing Address 502 11TH ST N

City

MOORHEAD

State

MN

Zip Code

56560-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27412628

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 561 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EARL E ROTH, JR

Mailing Address 2511 E PARADISE DR

City

PHOENIX

State

AZ

Zip Code

85028-1130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27412640

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM CUPPLES

Mailing Address 12726 HARTS ISLAND RD

City

SHREVEPORT

State

LA

Zip Code

71115-9439

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27412649

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT THEIS

Mailing Address 446 VICKSBURG AVE

City

KERRVILLE

State

TX

Zip Code

78028-2773

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27412667

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 562 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EDWARD S AGNI, JR

Mailing Address 14 CONROY TER

City

SCITUATE

State

MA

Zip Code

02066-4307

FEC ID number of contributing
federal political committee.

C

Name of Employer
VINCENT NARDO

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	8

Transaction ID: 27412669

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR MATTHEW B BLUHM

Mailing Address 1439 PARLOR CITY DR

City

BLUFFTON

State

IN

Zip Code

46714-3859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	8

Transaction ID: 27412711

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

J R TKACH

Mailing Address 1184 BEND RD

City

MERCER

State

PA

Zip Code

16137-2508

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27412782

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 563 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT AMARAL

Mailing Address 79 REED RD

City

OAKDALE

State

CA

Zip Code

95361-8202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27412864

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT L KUKLI

Mailing Address 5001 N DRAKE AVE

City

CHICAGO

State

IL

Zip Code

60625-5530

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27412947

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR TERRY WOOTEN

Mailing Address 434 EARLYS MOUNTAIN RD

City

LEICESTER

State

NC

Zip Code

28748-5618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27412974

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

495.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 564 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROGER D MARKHAM

Mailing Address 963 LINCOLN ST

City

CRAIG

State

CO

Zip Code

81625-1717

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27412988

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS I HOWARD

Mailing Address 5075 BRADY ST APT 103

City

SWARTZ CREEK

State

MI

Zip Code

48473-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27413001

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOE O'SULLIVAN

Mailing Address 301 W JACKSON ST

City

BELVIDERE

State

IL

Zip Code

61008-2503

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27413003

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 565 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MRS CAROL D D BUERGER

Mailing Address 36206 WAYMAN RD

City

GARBER

State

IA

Zip Code

52048-8059

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27413007

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

GLEN SCHULER

Mailing Address 2456 KRUSE DR

City

SAN JOSE

State

CA

Zip Code

95131-1233

FEC ID number of contributing
federal political committee.

C

Name of Employer

PLEASURE BOAT SPECIALTIES

Occupation

MARINE TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27413018

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

MR LARRY HELMS

Mailing Address 4305 FM 1755

City

CLARENDON

State

TX

Zip Code

79226-3634

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27413056

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 566 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TERRY HUTSON

Mailing Address PO BOX 688

City

BEARDEN

State

AR

Zip Code

71720-0688

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27413092

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR VERNER HOLMSTROM

Mailing Address 19898 PROVIDENCE DR

City

LEBANON

State

MO

Zip Code

65536-6185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27413127

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR FLOYD MILES, JR

Mailing Address 15188 FIDDLESTICKS BLVD

City

FORT MYERS

State

FL

Zip Code

33912-2437

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27413140

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 567 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES R O'DELL

Mailing Address 1027 MCRAE WAY

City

ROSEVILLE

State

CA

Zip Code

95678-7575

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27413218

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MS ELSA RODRIGUEZ

Mailing Address 3407 PROSPERITY ROSE AVE

City

BAKERSFIELD

State

CA

Zip Code

93313-5530

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27413238

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

BERND J BOYT

Mailing Address 833 CHOCTAW LN

City

SHALIMAR

State

FL

Zip Code

32579-2248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27413380

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 568 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT ALVEY

Mailing Address 400 MAGGIE DR

City

SPRINGFIELD

State

IL

Zip Code

62711-6145

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27413430

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

J D GRINDSTAFF

Mailing Address PO BOX 35

City

MILLIGAN COLLEGE

State

TN

Zip Code

37682-0035

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27413435

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR ORVIL MCKINNEY

Mailing Address 1024 DAVIS ST

City

NEW MADRID

State

MO

Zip Code

63869-1610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
MINISTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27413439

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 569 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ORVIL MCKINNEY

Mailing Address 1024 DAVIS ST

City

NEW MADRID

State

MO

Zip Code

63869-1610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

MINISTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27413441

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR FRANK BYERS

Mailing Address PO BOX 221

City

RICHWOOD

State

NJ

Zip Code

08074-0221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27413522

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

R A PLOTECHER

Mailing Address W3021 US HIGHWAY 2

City

VULCAN

State

MI

Zip Code

49892-8205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27413572

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 570 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LAWSON LARD

Mailing Address PO BOX 1916

City

HIGHLANDS

State

NC

Zip Code

28741-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27413585

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MS JOANN MUIR

Mailing Address 298 MUIR RANCH RD

City

ALEDO

State

TX

Zip Code

76008-3700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27413664

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR EDWARD RISTOW

Mailing Address 1500 MILAN AVE

City

SOUTH PASADENA

State

CA

Zip Code

91030-3932

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27413669

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 571 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DARRELL SCHERWINSKI

Mailing Address 3420 ROYAL OAK DR

City

PLOVER

State

WI

Zip Code

54467-3783

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27413677

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD SOMERS

Mailing Address 1040 N UNION ST

City

GARY

State

IN

Zip Code

46403-1460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27413700

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

R E BRANDOM

Mailing Address 5231 COIT DR

City

RENO

State

NV

Zip Code

89523-2609

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27413750

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 572 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT COMSTOCK

Mailing Address 17555 S TROUT CREEK RD

City

MOLALLA

State

OR

Zip Code

97038-8743

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27413770

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR EDDIE W STEWART

Mailing Address PO BOX 102

City

HOLDEN

State

LA

Zip Code

70744-0102

FEC ID number of contributing
federal political committee.

C

Name of Employer
L&W ONE STOP

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27413785

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID HUSSONG

Mailing Address 15221 BAUGHMAN DR

City

SILVER SPRING

State

MD

Zip Code

20906-1203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27413800

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 573 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN D CRAGIN

Mailing Address 4815 95TH AVE W

City

UNIVERSITY PLACE

State

WA

Zip Code

98467-1408

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27413821

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

DR RON J BATES, DO

Mailing Address 2880 TIMBERLAND DR

City

BATESVILLE

State

AR

Zip Code

72501-7837

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27413837

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR RANDALL ASH

Mailing Address 522 W WILLET TA ST

City

PHOENIX

State

AZ

Zip Code

85003-1221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27413888

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 574 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BILLY BURKE

Mailing Address 9 CANTOR LN

City

FLORENCE

State

IN

Zip Code

47020-9411

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLUOR ENTERPRISES, INC.

Occupation

CONTRACTOR COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27413918

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR CURTIS WRIGHT

Mailing Address 14 RUTHERN WAY

City

ROCKPORT

State

MA

Zip Code

01966-2324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27414028

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

RONNIE THOMASON

Mailing Address PO BOX 321

City

JUDSONIA

State

AR

Zip Code

72081-0321

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNION LOCAL 179

Occupation

CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

Transaction ID: 27414055

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 575 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
RONNIE THOMASON

Mailing Address PO BOX 321

City State Zip Code
JUDSONIA AR 72081-0321

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNION LOCAL 179

Occupation
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27414058

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)
MR MELVIN SHORT, JR

Mailing Address 9910 W 3RD ST

City State Zip Code
DAYTON OH 45427-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.84

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27414129

Amount of Each Receipt this Period

125.42

C.

Full Name (Last, First, Middle Initial)
MR ROBERT BURKLEY

Mailing Address 1409 MIDHURST CT

City State Zip Code
BEL AIR MD 21014-5910

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27414191

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

245.42

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 576 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MS CHARLOTTE TROUTNER

Mailing Address 7054 MOUNT HOUSTON RD

City

HOUSTON

State

TX

Zip Code

77050-5704

FEC ID number of contributing
federal political committee.

C

Name of Employer

MISSION PETROLEUM CARRIERS
INC

Occupation

OFFICE WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27414218

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR LLOYD DAHLEN

Mailing Address 236 KNOWLTON ST

City

MANCHESTER

State

NH

Zip Code

03103-2829

FEC ID number of contributing
federal political committee.

C

Name of Employer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27414255

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR STANLEY ANDERSON

Mailing Address 2204 ANACONDA RD

City

TARBORO

State

NC

Zip Code

27886-8820

FEC ID number of contributing
federal political committee.

C

Name of Employer

AIR SYSTEMS COMPONENTS

Occupation

TOOL & DIE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27414324

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 577 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE PHILLIPS

Mailing Address PO BOX 3171

City

CINCINNATI

State

OH

Zip Code

45201-3171

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27414348

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN J PILIGNO

Mailing Address 448 RADIX RD

City

WILLIAMSTOWN

State

NJ

Zip Code

08094-3753

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27414502

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ALLEN CORNELL

Mailing Address PO BOX 312333

City

NEW BRAUNFELS

State

TX

Zip Code

78131-2333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27414525

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 578 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ED MCKENZIE

Mailing Address 29081 US HIGHWAY 19 N LOT 91

City

CLEARWATER

State

FL

Zip Code

33761-2421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27414547

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JOE A HARMER

Mailing Address 35377 MOUNTAIN VIEW ST

City

YUCAIPA

State

CA

Zip Code

92399-4808

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27414567

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR NORMAN ROUSSELOT

Mailing Address 126 EDMONT RD

City

SONORA

State

TX

Zip Code

76950-6607

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27414590

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

640.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 579 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR VIRGIL DASILVA

Mailing Address 239 FOUNDRY ST

City

SOUTH EASTON

State

MA

Zip Code

02375-1701

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARITAS GOOD SAMARITAN ME-
DICAL

Occupation

REGISTERED NURSE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

544.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27414621

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR VIRGIL DASILVA

Mailing Address 239 FOUNDRY ST

City

SOUTH EASTON

State

MA

Zip Code

02375-1701

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARITAS GOOD SAMARITAN ME-
DICAL

Occupation

REGISTERED NURSE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

519.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27414622

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MS BETTY THOMAS

Mailing Address 1311 NORTHGATE DR

City

OPELIKA

State

AL

Zip Code

36801-2055

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

TEACHER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27414629

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 580 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES CONCINO

Mailing Address 1436 S DUKE ST APT 1

City

YORK

State

PA

Zip Code

17403-4520

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27414662

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES P DEXTER

Mailing Address 507 25TH ST

City

OGDEN

State

UT

Zip Code

84401-2450

FEC ID number of contributing
federal political committee.

C

Name of Employer
US FOREST SERVICE

Occupation
FORESTER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27414693

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES P DEXTER

Mailing Address 507 25TH ST

City

OGDEN

State

UT

Zip Code

84401-2450

FEC ID number of contributing
federal political committee.

C

Name of Employer
US FOREST SERVICE

Occupation
FORESTER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

711.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27414696

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 581 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FRANCIS D DOHERTY

Mailing Address 1150 LANCELOT WAY

City

CASSELBERRY

State

FL

Zip Code

32707-3921

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27414699

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR WALTER D OSBORNE

Mailing Address 7654 CONGRESS CT

City

MOORESVILLE

State

IN

Zip Code

46158-7722

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27414718

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR SAM CHESTNUT

Mailing Address PO BOX 313

City

QUINTER

State

KS

Zip Code

67752-0313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27414752

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 582 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

TERRY DILLING

Mailing Address 305 S MARKET ST

City

MARTINSBURG

State

PA

Zip Code

16662-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEIDY'S HOME FURNISHINGS

Occupation

FURITURE STORE OWNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27414780

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR RJ CORTESI

Mailing Address 3804 JUAN TABO BLVD NE STE B

City

ALBUQUERQUE

State

NM

Zip Code

87111-3985

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SELF-EMPLOYED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Transaction ID: 27414807

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN H BARRETTE

Mailing Address 930 25TH PL

City

WISCONSIN RAPIDS

State

WI

Zip Code

54494-3199

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27414812

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 583 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHARLES E ORY, SR

Mailing Address 9334 RIO HONDO DR

City

CREOLA

State

AL

Zip Code

36525-4719

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27414832

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT COMSTOCK

Mailing Address 17555 S TROUT CREEK RD

City

MOLALLA

State

OR

Zip Code

97038-8743

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27414865

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN B WELCH

Mailing Address 4800 N POINT RD

City

ALPENA

State

MI

Zip Code

49707-8823

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27414887

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 584 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LINUS F METZ

Mailing Address 4891 E SCHNELLVILLE RD

City

SAINT ANTHONY

State

IN

Zip Code

47575-9712

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27414903

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JOSEPH CASSELLA

Mailing Address 27 CLARK LN

City

WALTHAM

State

MA

Zip Code

02451-1822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27414924

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR LYLE R JORDAN

Mailing Address 351 MAUDLOW RD

City

BELGRADE

State

MT

Zip Code

59714-8003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27414938

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 585 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN A MUSIL

Mailing Address 521 E MONETA AVE

City

PEORIA

State

IL

Zip Code

61616-6225

FEC ID number of contributing
federal political committee.

C

Name of Employer
KIMATSUR AMERICA

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27414951

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR REX SHROYER

Mailing Address HC 75 BOX 1195

City

LOS OJOS

State

NM

Zip Code

87551-9712

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27414957

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MS JEANETTE L GLEESON

Mailing Address 2106 OLD BAINBRIDGE RD

City

TALLAHASSEE

State

FL

Zip Code

32303-3905

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27414974

Amount of Each Receipt this Period

175.00

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 586 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MS JEANETTE L GLEESON

Mailing Address 2106 OLD BAINBRIDGE RD

City

TALLAHASSEE

State

FL

Zip Code

32303-3905

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27414976

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR RAFAEL CANCINO

Mailing Address 8565 PEARL CREST CT

City

ELK GROVE

State

CA

Zip Code

95624-2832

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27415014

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOSEPH GEMME

Mailing Address 140 PRINCE HINCKLEY RD

City

CENTERVILLE

State

MA

Zip Code

02632-2150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27415023

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 587 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ANDRES E MEDINA

Mailing Address 1237 HERON AVE

City

MIAMI SPRINGS

State

FL

Zip Code

33166-3120

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOT / FAA

Occupation

AIR TRANSPORTATION SYSTEMS SPE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27415024

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR NELSON YODER

Mailing Address 5408 TOWNSHIP ROAD 401

City

MILLERSBURG

State

OH

Zip Code

44654-7005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27415039

Amount of Each Receipt this Period

325.00

C.

Full Name (Last, First, Middle Initial)

MR DONALD PURBAUGH

Mailing Address 1720 COUNTY ST

City

ELIZABETH CITY

State

NC

Zip Code

27909-3108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27415050

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 588 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THERON M VANDUSEN

Mailing Address 407 WESTBURY DR

City

CHAPEL HILL

State

NC

Zip Code

27516-7004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27415059

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

ALFRED L BRANCH, JR

Mailing Address 1720 BENT TREE CT

City

GRANBURY

State

TX

Zip Code

76049-8086

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY CORP OF ENGINEERS

Occupation

CIVIL ENGINEER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27415121

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR FREDRIK RANDVERE

Mailing Address 3850 WASHINGTON ST APT 902

City

HOLLYWOOD

State

FL

Zip Code

33021-7356

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27415131

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 589 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

G TOSTEVIN

Mailing Address 12555 37TH AVE NE

City

SEATTLE

State

WA

Zip Code

98125-4654

FEC ID number of contributing
federal political committee.

C

Name of Employer
SEATTLE CITY LIGHT

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27415146

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR PAUL F SAAM

Mailing Address 137 E DAFFODIL RD

City

RUCKERSVILLE

State

VA

Zip Code

22968-2442

FEC ID number of contributing
federal political committee.

C

Name of Employer
TECHNICOLOR PACKAGED MEDIA

Occupation
MATERIAL HANDLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27415174

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES HANSEN

Mailing Address 4902 64TH ST E

City

TACOMA

State

WA

Zip Code

98443-2347

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27415259

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 590 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LADIS C MOTL

Mailing Address 22 MARSDEN LN

City

PALO PINTO

State

TX

Zip Code

76484-3741

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED - CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27415338

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JIM EASTES

Mailing Address PO BOX 2136

City

LAKE ISABELLA

State

CA

Zip Code

93240-2136

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27415343

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR SHERWOOD KAIP

Mailing Address 1204 TURNBERRY RD

City

EL PASO

State

TX

Zip Code

79912-2036

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

MEDICAL DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27415357

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

580.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 591 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHNNY JOHNSON

Mailing Address 308 WOODLAWN CIR

City

LUFKIN

State

TX

Zip Code

75904-8422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27415377

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR DON BROOKS

Mailing Address 2800 MOUNT PLEASANT ST APT 5

City

RACINE

State

WI

Zip Code

53404-1856

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27415433

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT J LUNN

Mailing Address 6236 ORIOLE LN

City

MINNEAPOLIS

State

MN

Zip Code

55436-1918

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27415452

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 592 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PETER A POCCIA

Mailing Address 5 CANTINES ISLAND LN

City

SAUGERTIES

State

NY

Zip Code

12477-1840

FEC ID number of contributing
federal political committee.

C

Name of Employer
LENOX HILL HOSPITAL

Occupation

EMERGENCY ROOM R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27415470

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JEFF VIVION

Mailing Address 3864 S VICTOR AVE

City

TULSA

State

OK

Zip Code

74105-8127

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27415491

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS RUTH CATTOOR

Mailing Address 2705 COUNTY ROAD 139

City

CRAIG

State

CO

Zip Code

81625-9412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27415506

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 593 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

ANDRE NOVICKIS

Mailing Address 18290 BENT OAK LN

City

MONUMENT

State

CO

Zip Code

80132-8840

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27415522

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR IAN DERRICK

Mailing Address 24501 SW SHADOW LN

City

GRAND RONDE

State

OR

Zip Code

97347-9620

FEC ID number of contributing
federal political committee.

C

Name of Employer
RIDEOUT MEMORIAL HOSPITAL

Occupation

REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27415539

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR DOUGLAS A CHILCOTE

Mailing Address 1501 N 36TH ST APT 3

City

SAINT JOSEPH

State

MO

Zip Code

64506-2340

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27415541

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 594 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RALPH S DEGROODT

Mailing Address 31661 WELL BOTTOM RD

City

GALENA

State

MD

Zip Code

21635-1334

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27415608

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR RALPH S DEGROODT

Mailing Address 31661 WELL BOTTOM RD

City

GALENA

State

MD

Zip Code

21635-1334

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27415610

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR STEVE CAMPODONICO

Mailing Address 115 SCHELLER AVE

City

MORGAN HILL

State

CA

Zip Code

95037-9343

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27415620

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

585.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DANIEL TURRISI

Mailing Address 164 LIBERTY ST

City

PAWCATUCK

State

CT

Zip Code

06379-1340

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27415621

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR BRYAN JONES

Mailing Address 3916 RIVIERA DR UNIT 301

City

SAN DIEGO

State

CA

Zip Code

92109-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27415640

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN E ALLIS

Mailing Address 1407 EBERHARD ST

City

HOUSTON

State

TX

Zip Code

77019-4149

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27415677

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ERIC C LASSELLE

Mailing Address 4508 S ELM ST

City

TEMPE

State

AZ

Zip Code

85282-7302

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEDTRONIC

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27415716

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR FREDERICK J FEDDERSEN

Mailing Address 12213 AMBERSET DR

City

KNOXVILLE

State

TN

Zip Code

37922-9310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27415725

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR BILL CORISH

Mailing Address 13388 APPALACHIAN OVERLOOK DR

City

LINDEN

State

VA

Zip Code

22642-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORISH ENGINEERING

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27415759

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1075.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 597 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PAUL KURTZ

Mailing Address 1106 CHESTNUT HILL CIR SW

City

MARIETTA

State

GA

Zip Code

30064-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27415766

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR STEPHEN WILKERSON

Mailing Address 161 IDORA AVE

City

SAN FRANCISCO

State

CA

Zip Code

94127-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer
HINES GS

Occupation

STATIONARY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27415770

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD MORROW

Mailing Address 1737 HIGHWAY 61

City

WEVER

State

IA

Zip Code

52658-9554

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27415795

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN F TEPE

Mailing Address 8356 MAINEVILLE RD

City

MAINEVILLE

State

OH

Zip Code

45039-8611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27415811

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR WOODROW BROWN

Mailing Address 113 KALBACH RD

City

NEWMANSTOWN

State

PA

Zip Code

17073-9126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27415816

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM C SHILLING

Mailing Address HC 69 BOX 101

City

ANTLERS

State

OK

Zip Code

74523-9208

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27415821

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 599 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MS CONNIE J MOORE

Mailing Address 425 SCENIC DR

City

HENDERSON

State

NV

Zip Code

89002-8337

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27415859

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT J LAVIOLETTE

Mailing Address 8686 HUNT CLUB RD

City

ZIONSVILLE

State

IN

Zip Code

46077-8447

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27415875

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR JOSEPH L PAPA, JR

Mailing Address 88 BISHOP ST

City

NORTH HAVEN

State

CT

Zip Code

06473-2031

FEC ID number of contributing
federal political committee.

C

Name of Employer
HART UNITED

Occupation

RESIDENTIAL COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27415877

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

730.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 600 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LAWRENCE D MILLER

Mailing Address 795 COURT OF SPRUCE APT 1

City

VERNON HILLS

State

IL

Zip Code

60061-2650

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANALYSTS INTERNATIONAL

Occupation

SOFTWARE ENGINEER CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27415886

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JOE S JOHNSON, JR

Mailing Address PO BOX 501

City

TALBOTTON

State

GA

Zip Code

31827-0501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27415906

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MRS MARILYN COURTNEY

Mailing Address 1575 SANDERS MILL RD

City

STEENS

State

MS

Zip Code

39766-8520

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27415910

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 601 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LEONARD BARTZ

Mailing Address RR 3 BOX 95

City

APPLETON CITY

State

MO

Zip Code

64724-9439

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 8

Transaction ID: 27415940

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID LINTON

Mailing Address 145 UGUGU DR

City

BREVARD

State

NC

Zip Code

28712-8278

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27415957

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR GARY BAIRD

Mailing Address 1650 S KENDALL ST

City

LAKEWOOD

State

CO

Zip Code

80232-7062

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
SYSTEM ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27415973

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 602 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DARALD MOULTON

Mailing Address PO BOX 57

City

WEST CHARLESTON

State

VT

Zip Code

05872-0057

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27415977

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

MR PAUL F ALLEN

Mailing Address 800 PROSPECT ELKTON RD

City

PROSPECT

State

TN

Zip Code

38477-6224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27416010

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL F ALLEN

Mailing Address 800 PROSPECT ELKTON RD

City

PROSPECT

State

TN

Zip Code

38477-6224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27416012

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 603 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD S LENTZ

Mailing Address 5220 VESTA RD

City

CHARLESTOWN

State

IN

Zip Code

47111-9410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27416053

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR LARRY C SCHMIDT

Mailing Address 4237 6TH ST NE

City

COLUMBIA HTS

State

MN

Zip Code

55421-2828

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	0	8

Transaction ID: 27416058

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DANIEL B LOGAN

Mailing Address 121 SHAKERS LANDING RD

City

HARRODSBURG

State

KY

Zip Code

40330-9251

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27416132

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 604 / 1300

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GERALD KORTMEYER

Mailing Address 34950 DATE PALM DR

City

CATHEDRAL CITY

State

CA

Zip Code

92234-6833

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27416135

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR BETSY GOBLE

Mailing Address 11 SAINT LAURENT PL

City

DALLAS

State

TX

Zip Code

75225-8111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27416212

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR PETER A POCCIA

Mailing Address 5 CANTINES ISLAND LN

City

SAUGERTIES

State

NY

Zip Code

12477-1840

FEC ID number of contributing
federal political committee.

C

Name of Employer
LENOX HILL HOSPITALOccupation
EMERGENCY ROOM R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27416220

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

695.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 605 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RANDALL O YOUNG

Mailing Address 7700 SW BRENTWOOD ST

City

PORTLAND

State

OR

Zip Code

97225-2316

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27416238

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM S WHITAKER

Mailing Address 3341 COTTAGE WAY APT 59

City

SACRAMENTO

State

CA

Zip Code

95825-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27416261

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DUANE FRIESE

Mailing Address PO BOX 75

City

PINE ISLAND

State

MN

Zip Code

55963-0075

FEC ID number of contributing
federal political committee.

C

Name of Employer
VAN WYKE DAIRY SUPPLYOccupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27416275

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 606 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JIM EASTES

Mailing Address PO BOX 2136

City

LAKE ISABELLA

State

CA

Zip Code

93240-2136

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27416338

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR GEOFFREY H PURDY

Mailing Address 43 MINE HILL RD

City

ROXBURY

State

CT

Zip Code

06783-1323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27416356

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR TERRY L HONEYCUTT

Mailing Address 500 N JEFFERSON AVE APT C2

City

SARASOTA

State

FL

Zip Code

34237-5139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27416382

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 607 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TERRY L HONEYCUTT

Mailing Address 500 N JEFFERSON AVE APT C2

City

SARASOTA

State

FL

Zip Code

34237-5139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27416384

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE F MOCABY

Mailing Address 317 MAPLE ST

City

EMMETT

State

ID

Zip Code

83617-3128

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27416403

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE F MOCABY

Mailing Address 317 MAPLE ST

City

EMMETT

State

ID

Zip Code

83617-3128

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27416405

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 608 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE F MOCABY

Mailing Address 317 MAPLE ST

City

EMMETT

State

ID

Zip Code

83617-3128

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27416407

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES HOUSE

Mailing Address 1224 W 23RD ST

City

HOUSTON

State

TX

Zip Code

77008-1816

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27416444

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR GERALD D BITTNER

Mailing Address 245 HILL RD

City

ESKO

State

MN

Zip Code

55733-9558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27416471

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 609 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DES CASEY

Mailing Address 20595 W RIVERVIEW DR

City

POST FALLS

State

ID

Zip Code

83854-7796

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27416493

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT J PUGH

Mailing Address 4 WESTWOOD FOREST LN

City

KIRKWOOD

State

MO

Zip Code

63122-6556

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27416494

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR GERALD LINDSEY

Mailing Address PO BOX 15088

City

LYNCHBURG

State

VA

Zip Code

24502-9009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27416515

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 610 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STEVE ALLEN

Mailing Address 1513 TOUCHTON RD

City

LUTZ

State

FL

Zip Code

33549-5661

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27416543

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR N BOLTON

Mailing Address PO BOX 246

City

TRUMBAUERSVILLE

State

PA

Zip Code

18970-0246

FEC ID number of contributing
federal political committee.

C

Name of Employer
AGP PLASTICS

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27416563

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT H KALISZEWSKI

Mailing Address 127 17TH AVE N

City

SOUTH ST PAUL

State

MN

Zip Code

55075-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27416567

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 611 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FERDINAND OHNSORG

Mailing Address 1181 EDGCUMBE RD APT 1716

City

SAINT PAUL

State

MN

Zip Code

55105-2837

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27416615

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR DARYL HILL

Mailing Address 12814 RUTHERFORD RD

City

YAKIMA

State

WA

Zip Code

98903-9742

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27416671

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR DARYL HILL

Mailing Address 12814 RUTHERFORD RD

City

YAKIMA

State

WA

Zip Code

98903-9742

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27416673

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 612 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

R HUBER

Mailing Address 7339 CENTRAL AVE

City

GLENDAL

State

NY

Zip Code

11385-8202

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUPERIOR INTERLOCK

Occupation
MACHINIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27416678

Amount of Each Receipt this Period

80.00

B.

Full Name (Last, First, Middle Initial)

MR SAMUEL JONES

Mailing Address 7 POLO DR

City

COLORADO SPRINGS

State

CO

Zip Code

80906-3139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27416688

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR ED MORGAN

Mailing Address 6902 ORANGE BOX DR

City

FLAGSTAFF

State

AZ

Zip Code

86004-1221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27416691

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 613 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MS C NADINE HAGER

Mailing Address 1320 CALIFORNIA AVE

City

MODESTO

State

CA

Zip Code

95351-9421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27416703

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM WALLACE

Mailing Address PO BOX 98488

City

LUBBOCK

State

TX

Zip Code

79499-8488

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

LIVESTOCK OPERATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27416705

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DEAN HARVEY

Mailing Address 1550 CANADA ST

City

JACKSONVILLE

State

TX

Zip Code

75766-5202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27416755

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 614 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

ANDY SECORD

Mailing Address 12260 LINDEN RD

City

LINDEN

State

MI

Zip Code

48451-9483

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27416770

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID W HOOVER

Mailing Address PO BOX 186

City

MANQUIN

State

VA

Zip Code

23106-0186

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: 27416790

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES GORDON

Mailing Address 1105 GROVE ST

City

BALDWIN CITY

State

KS

Zip Code

66006-3079

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27416812

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 615 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BOBBY EASON

Mailing Address 13300 FM 2210 EAST

City

BRIDGEPORT

State

TX

Zip Code

76426-5610

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27416902

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR ALBERT SCHAFER

Mailing Address 3573 E 1300 N

City

SYRACUSE

State

IN

Zip Code

46567-9304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27416971

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN CERVIN, JR

Mailing Address 514 SELLRUS CT

City

FALLSTON

State

MD

Zip Code

21047-2421

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27416995

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ANDREW L STUBBLEFIELD

Mailing Address 75 EVANS RD

City

CUBA

State

MO

Zip Code

65453-8044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27417005

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR MITCHELL D HALE

Mailing Address PO BOX 671572

City

CHUGIAK

State

AK

Zip Code

99567-1572

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27417143

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR LARRY KUEFNER

Mailing Address 2221 NW 82ND ST APT 1

City

CLIVE

State

IA

Zip Code

50325-4461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27417164

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

480.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM BLALOCK

Mailing Address 2575 IUKA RD

City

POTEET

State

TX

Zip Code

78065-3593

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27417180

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR MICK E BOYER

Mailing Address 11738 N BELLEFONTAINE AVE LOT

City

KANSAS CITY

State

MO

Zip Code

64156-1002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27417207

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MS MARY SHEEHAN

Mailing Address 77 SCHUMACHER DR

City

NEW HYDE PARK

State

NY

Zip Code

11040-3605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27417212

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

680.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

A A PHIPPS

Mailing Address 11172 EL NOPAL

City

LAKESIDE

State

CA

Zip Code

92040-2206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27417221

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR RON M ODELL

Mailing Address 2 MCGOVERN DR

City

GARNERVILLE

State

NY

Zip Code

10923-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer

ORANGE & ROLKLAND UTILITI-
ES

Occupation

UNDERGROUND LINE FOREMAN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27417232

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES H STEWART

Mailing Address 9818 NE 24TH ST

City

BELLEVUE

State

WA

Zip Code

98004

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEDICAL DOCTOR

Occupation

HAMILTON MEDICAL GROUP

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27417295

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 619 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ALFRED R LEAL

Mailing Address 143 FIELDSTONE DR

City

CARLISLE

State

PA

Zip Code

17015-9054

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27417322

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID L FISSE

Mailing Address 812 N SHORE DR

City

HIGHLAND VILLAGE

State

TX

Zip Code

75077-6484

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27417333

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

MR ALBERT A CHAMPAGNE, JR

Mailing Address 1194 WESTHAMPTON RD

City

FLORENCE

State

MA

Zip Code

01062-9794

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27417334

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

680.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 620 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LAWRENCE N REYNOLDS

Mailing Address 3907 NW 4TH CT

City

DEERFIELD BEACH

State

FL

Zip Code

33442-7357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27417342

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR GENE STACKHOUSE

Mailing Address 10022 CAIRN MEADOWS DR

City

SPRING

State

TX

Zip Code

77379-2984

FEC ID number of contributing
federal political committee.

C

Name of Employer
WASHINGTON GROUP/INTERNAT-
IONALOccupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27417355

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES WHITE

Mailing Address 2576 FALLEN LEAF LN

City

CHARLOTTESVILLE

State

VA

Zip Code

22901-5224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27417382

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 621 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HENRY LUEDKE

Mailing Address 610 AVENUE H

City

WACO

State

TX

Zip Code

76705-1872

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27417393

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN ERICKSON

Mailing Address PO BOX 73

City

SALEM

State

IL

Zip Code

62881-0073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Transaction ID: 27417437

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT PATTERSON

Mailing Address 501 SECURITY BLVD APT 214B

City

COLORADO SPRINGS

State

CO

Zip Code

80911-1705

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

379.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	0	8

Transaction ID: 27417460

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 622 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FRED W BOTH

Mailing Address 433 S PHELPS AVE

City

ARLINGTON HTS

State

IL

Zip Code

60004-6919

FEC ID number of contributing
federal political committee.

C

Name of Employer

SIGNATURE FLIGHT SUPPORT

Occupation

REFUELER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27417537

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR BEN CAMP

Mailing Address 26680 JENNIFER LN

City

DENHAM SPRINGS

State

LA

Zip Code

70726-5900

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27417540

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD DUCHARME

Mailing Address 110 RIVER RANCH LN

City

DAYTON

State

WA

Zip Code

99328-8628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27417572

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 623 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BILL SELMER

Mailing Address 509 COURTLAND DR

City

SAN BERNARDINO

State

CA

Zip Code

92405-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27417620

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD WILDBUR

Mailing Address 2404 DEARBORN AVE

City

KALAMAZOO

State

MI

Zip Code

49048-2114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27417635

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL MITCHELL

Mailing Address 8036 S HARRISON WAY

City

CENTENNIAL

State

CO

Zip Code

80122-3621

FEC ID number of contributing
federal political committee.

C

Name of Employer
PAUL MITCHELL & COMPANY,
P.C.

Occupation

CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27417660

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 624 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES GRUBB

Mailing Address 17935 RIVER SHORE DR

City

TALL TIMBERS

State

MD

Zip Code

20690-2200

FEC ID number of contributing
federal political committee.

C

Name of Employer
NATIONAL SMALL BUSINESS
ASSOC.

Occupation

MEMBERSHIP/MARKETING MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27417672

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR BOB TRUJILLO

Mailing Address 1000 PASEO DE PERALTA

City

SANTA FE

State

NM

Zip Code

87501-2736

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27417774

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR EDWARD M SENYKO

Mailing Address 7270 TOWNLINE RD

City

BRIDGEPORT

State

MI

Zip Code

48722-9719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27417800

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 625 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LEE A HANSON

Mailing Address 12309 HOUNDS BAY ROW

City

BAYONET POINT

State

FL

Zip Code

34667-2638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27417812

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

MR RANDY FERRILL

Mailing Address 750 W CANYON CREEK LN

City

WEATHERFORD

State

TX

Zip Code

76087-4057

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27417823

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS R STOUT

Mailing Address 106 EDGEWOOD DR

City

HIGGINSVILLE

State

MO

Zip Code

64037-1102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27417829

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 626 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM F FISCHER

Mailing Address 5270 MCCORMICK DR SW

City

WYOMING

State

MI

Zip Code

49418-8772

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27418029

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL J HANNUM

Mailing Address 14 LANGE CT

City

MULLICA HILL

State

NJ

Zip Code

08062-2513

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAMPBELLS EXPRESS

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27418060

Amount of Each Receipt this Period

525.00

C.

Full Name (Last, First, Middle Initial)

MR RAYMOND F HOFFMAN

Mailing Address 10881 LAKE FOREST DR

City

CONROE

State

TX

Zip Code

77384-3247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27418151

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

655.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 627 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FLOYD FLEEMAN

Mailing Address 217 MIMOSA CIR

City

PRESCOTT

State

AZ

Zip Code

86301-1265

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27418212

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR RUSSELL R ZIELESCH

Mailing Address 41150 FOX RUN APT WB208

City

NOVI

State

MI

Zip Code

48377-4861

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27418250

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR SHAWN E TURNER

Mailing Address 393384 W 2700 RD

City

OCHELATA

State

OK

Zip Code

74051-2126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27418252

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 628 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR JEROME COYNE

Mailing Address 7825 W 400 N

City State Zip Code
MICHIGAN CITY IN 46360-2909

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27418281

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
MR KEN PRYGA

Mailing Address 13410 104TH ST

City State Zip Code
PLEASANT PRAIRIE WI 53158-6104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27418303

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)
MR MIKE SIEGFRIED

Mailing Address 700 BILL ST

City State Zip Code
ANCHORAGE AK 99515-4400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27418305

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 629 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MIKE SIEGFRIED

Mailing Address 700 BILL ST

City

ANCHORAGE

State

AK

Zip Code

99515-4400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27418307

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ALAN E ALLMON

Mailing Address 6817 APPERSON ST

City

TUJUNGA

State

CA

Zip Code

91042-2017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27418371

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID MURPHY

Mailing Address PO BOX 225

City

SCOTLAND

State

GA

Zip Code

31083-0225

FEC ID number of contributing
federal political committee.

C

Name of Employer
FOREST TECH ASSOCIATES

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27418397

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 630 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

ELDION MCNABB

Mailing Address 5805 TURQUOISE MTN. DR

City

GREEN VALLEY

State

AZ

Zip Code

85614-8102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

194.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27418421

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

ELDION MCNABB

Mailing Address 5805 TURQUOISE MTN. DR

City

GREEN VALLEY

State

AZ

Zip Code

85614-8102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27418423

Amount of Each Receipt this Period

7.50

C.

Full Name (Last, First, Middle Initial)

MR ERNEST PICHNER

Mailing Address 2973 SE 74TH AVE

City

CLAREMONT

State

MN

Zip Code

55924-4511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27418470

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

107.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 631 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT PATTERSON

Mailing Address 501 SECURITY BLVD APT 214B

City

COLORADO SPRINGS

State

CO

Zip Code

80911-1705

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27418492

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES KNIGGE

Mailing Address 1146 W 21ST ST

City

SAN PEDRO

State

CA

Zip Code

90731-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27418514

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM H RACHEL, JR

Mailing Address 268 MARTINDALE DR

City

ALBANY

State

GA

Zip Code

31721-7805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27418534

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 632 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ERIC YURAN

Mailing Address 9093 TOWN & COUNTRY BLVD APT E

City

ELLICOTT CITY

State

MD

Zip Code

21043-3239

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOCKHEED MARTIN

Occupation

COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27418614

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR PAT WORLEY

Mailing Address 4606 SEAGRAVES DR

City

JOPLIN

State

MO

Zip Code

64804-5547

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27418629

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR AL NEWHOUSE, II

Mailing Address 35 LINDEN AVE

City

E LONGMEADOW

State

MA

Zip Code

01028-2205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27418642

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 633 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR AL NEWHOUSE, II

Mailing Address 35 LINDEN AVE

City

E LONGMEADOW

State

MA

Zip Code

01028-2205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27418643

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR FRED L ROSENBAUM

Mailing Address 801 MOSS ST

City

GAINESVILLE

State

TX

Zip Code

76240-5718

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27418655

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN W BULLMAN

Mailing Address 6295 JIMMY CARTER BLVD RM 200

City

NORCROSS

State

GA

Zip Code

30071-2313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27418673

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 634 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHNNIE T GLADDING

Mailing Address 17553 JUSTISVILLE RD

City

PARKSLEY

State

VA

Zip Code

23421-2217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27418675

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR CLETUS J SCHUYLER

Mailing Address 8607 77TH AVE

City

GLENDALE

State

NY

Zip Code

11385-7710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27418717

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MS KAREN L CARR

Mailing Address PO BOX 754

City

CONCORD

State

MA

Zip Code

01742-0754

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27418724

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 635 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM O ELLIS

Mailing Address 287 KINGSTON WAY

City

WALNUT CREEK

State

CA

Zip Code

94597-3160

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. POSTAL SERVICE

Occupation

MAIL HANDLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27418813

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT BONDURANT

Mailing Address PO BOX 468

City

DELHI

State

NY

Zip Code

13753-0468

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27418883

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR DENNIS MOORE

Mailing Address 8510 E BROOKHOLLOW ST

City

WICHITA

State

KS

Zip Code

67206-2408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27418984

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 636 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

ELDION MCNABB

Mailing Address 5805 TURQUOISE MTN. DR

City

GREEN VALLEY

State

AZ

Zip Code

85614-8102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27418998

Amount of Each Receipt this Period

7.50

B.

Full Name (Last, First, Middle Initial)

MR SAMUEL ABBOTT

Mailing Address 915 LOCUST ST

City

CARROLLTON

State

IL

Zip Code

62016-1227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27419026

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR GERALD K RUSSELL

Mailing Address 406 6TH ST

City

RAWLINS

State

WY

Zip Code

82301-5408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27419053

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

137.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 637 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR EUGENE LEDET

Mailing Address 1004 HIDDEN RIDGE DR

City

WOODWORTH

State

LA

Zip Code

71485-9529

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27419077

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MS CATHERINE FOSTER

Mailing Address 383 HIGGINS RD

City

FLOVILLA

State

GA

Zip Code

30216-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27419102

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR MIKE MORSE

Mailing Address 33080 SE PEORIA RD

City

CORVALLIS

State

OR

Zip Code

97333-2543

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORSE BROTHERS, INC

Occupation

RETIRED - MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27419135

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 638 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID BLATTNER

Mailing Address 23764 COUNTY ROAD 12

City

RICHMOND

State

MN

Zip Code

56368-8355

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27419169

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS C VICKOREN

Mailing Address 34619 NE FINALBURG RD

City

LA CENTER

State

WA

Zip Code

98629-3337

FEC ID number of contributing
federal political committee.

C

Name of Employer
UPS MANAGEMENT

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27419181

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR KENNETH A STJOHN

Mailing Address 207 ORIENTAL GDNS

City

PORTSMOUTH

State

NH

Zip Code

03801-3233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27419229

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 639 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

C S SUBLETT

Mailing Address 15995 N BARKERS LANDING RD STE

City

HOUSTON

State

TX

Zip Code

77079-2493

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27419231

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR MARK E BYRD

Mailing Address PO BOX 722045

City

SAN DIEGO

State

CA

Zip Code

92172-2045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27419237

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES SIESENER

Mailing Address 8425 LATTY AVE

City

HAZELWOOD

State

MO

Zip Code

63042-3240

FEC ID number of contributing
federal political committee.

C

Name of Employer

BOEING

Occupation

MATERIAL HANDLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27419241

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 640 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROGER HOFFMAN

Mailing Address 1612 S GOLF GLN UNIT F

City

MADISON

State

WI

Zip Code

53704-8460

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27419356

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR HARRY COMBS

Mailing Address 34 MARICIEL AVE

City

BAYVILLE

State

NJ

Zip Code

08721-2442

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27419439

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

DR STEPHEN G PREAS

Mailing Address 910 ATHENS HWY STE K BOX 331

City

LOGANVILLE

State

GA

Zip Code

30052-4948

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEPHEN G. PREAS, MD, PC

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27419444

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

480.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 641 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TIMOTHY J CALHOUN

Mailing Address 106 CHIMNEY LN

City

WILMINGTON

State

NC

Zip Code

28409-4908

FEC ID number of contributing
federal political committee.

C

Name of Employer
AAI PHARMA

Occupation

ASSOCIATE DIRECTOR, LOGISTICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27419469

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

DR B C MCCONNELL, JR

Mailing Address 3502 MIDWAY RD

City

ANDERSON

State

SC

Zip Code

29621-3720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27419576

Amount of Each Receipt this Period

675.00

C.

Full Name (Last, First, Middle Initial)

MR HOYT E THOMPSON

Mailing Address 10130 CREEL RD

City

FAIRBURN

State

GA

Zip Code

30213-2159

FEC ID number of contributing
federal political committee.

C

Name of Employer
THOMPSON TRUCKING CO., IN-
C.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27419601

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

795.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 642 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ALLEN MILLARD

Mailing Address 361 SE BLOOMFIELD RD

City

SHELTON

State

WA

Zip Code

98584-7230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27419635

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR MARK MASTERS

Mailing Address 2811 RULEME ST APT 101

City

EUSTIS

State

FL

Zip Code

32726-6538

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27419640

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR ALFRED J HOFFMAN

Mailing Address 5689 HOLLYHOCK RD

City

SAN ANTONIO

State

TX

Zip Code

78240-1609

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOBIN AERIAL SURVEYS, INC

Occupation
RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27419655

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 643 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CLAY HUBER

Mailing Address 236 BELLVUE DR

City

TOCCOA

State

GA

Zip Code

30577-3808

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27419723

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JON HART

Mailing Address 7 FEEDER CANAL CT

City

QUEENSBURY

State

NY

Zip Code

12804-4102

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27419766

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR RALPH W LAKE

Mailing Address 5432 JONESBORO WAY

City

BUENA PARK

State

CA

Zip Code

90621-1616

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27419789

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 644 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

ALAN E OSBY

Mailing Address 106 NAGLEE AVE

City

SANDSTON

State

VA

Zip Code

23150-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer
PHILIP MORRIS USA, INC

Occupation

INSTRUMENT ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27419791

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR ALLEN R VONADA

Mailing Address 15 GIRVIN LN

City

MIFFLINBURG

State

PA

Zip Code

17844-7626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27419825

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR RUSS HAZARD

Mailing Address 957 APPLEBLOSSOM DR

City

HIGHLANDS RANCH

State

CO

Zip Code

80126-2739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27419858

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 645 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROGER NUTT

Mailing Address 19320 N 1550TH AVE

City

ATKINSON

State

IL

Zip Code

61235-9508

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOHN DEERE HARVESTER WORKS

Occupation

WELDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27419866

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR DANIEL FARR

Mailing Address 1107 11TH ST SW

City

SIDNEY

State

MT

Zip Code

59270-5225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27419949

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM STONER

Mailing Address PO BOX 457

City

LA PRYOR

State

TX

Zip Code

78872-0457

FEC ID number of contributing
federal political committee.

C

Name of Employer

TRANS OCEAN OFFSHORE DEEP-
WATER

Occupation

ROUGHNECK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27420009

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 646 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DEAN SHIELDS

Mailing Address PO BOX 403

City

LA BARGE

State

WY

Zip Code

83123-0403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27420020

Amount of Each Receipt this Period

325.00

B.

Full Name (Last, First, Middle Initial)

MR GARY D BOND

Mailing Address 1600 TWO BRIDGE DR

City

OKLAHOMA CITY

State

OK

Zip Code

73131-1807

FEC ID number of contributing
federal political committee.

C

Name of Employer
KIDNEY SPEC. OF CENTRAL
OHIOOccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27420073

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR GARY D BOND

Mailing Address 1600 TWO BRIDGE DR

City

OKLAHOMA CITY

State

OK

Zip Code

73131-1807

FEC ID number of contributing
federal political committee.

C

Name of Employer
KIDNEY SPEC. OF CENTRAL
OHIOOccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	8

Transaction ID: 27420075

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1075.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 647 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DENNIS J MCNERNEY

Mailing Address 66 LONG MEADOW HILL RD

City

BROOKFIELD

State

CT

Zip Code

06804-1324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	8

Transaction ID: 27420111

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR ELTON DYAL

Mailing Address 875 W PECOS RD APT 1152

City

CHANDLER

State

AZ

Zip Code

85225-7605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27420129

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)

MR CRAIG SCHAFER

Mailing Address 22318 CAMPBELL RD

City

SPENCERVILLE

State

IN

Zip Code

46788-9693

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27420150

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 648 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JIM CONLEY

Mailing Address 3914 VIA MILANO

City

CAMPBELL

State

CA

Zip Code

95008-2630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27420161

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MS REBECCA SUGDEN

Mailing Address 2150 KURT CT

City

APOPKA

State

FL

Zip Code

32703-9405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27420182

Amount of Each Receipt this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

MR NORRIS S BROWN

Mailing Address 180 LONNIE BROWN RD

City

SOPCHOPPY

State

FL

Zip Code

32358-6300

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27420185

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

3295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 649 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DON SPITLER

Mailing Address 8927 HILLCREST DR

City

LAKEVIEW

State

OH

Zip Code

43331-9763

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27420191

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR PERVIS BALLEW

Mailing Address 3051 ORION CV

City

BARTLETT

State

TN

Zip Code

38134-2830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27420226

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MS MARY JACOBS

Mailing Address 2744 BROAD BAY RD

City

VIRGINIA BEACH

State

VA

Zip Code

23451-1645

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27420228

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 650 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GARY W MARTIN

Mailing Address 496 N CARY ST

City

BROCKTON

State

MA

Zip Code

02302-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer
QUINCY AUTO AUCTION

Occupation
SECURITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27420262

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM E GALLOWAY, JR

Mailing Address 5875 WHISPERING LN

City

TITUSVILLE

State

FL

Zip Code

32780-7009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27420275

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR DONALD F RAY

Mailing Address 944 COUNTY ROAD 715

City

NACOGDOCHES

State

TX

Zip Code

75964-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27420283

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 651 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JACKIE SUGGS

Mailing Address 6150 S BUFKIN DR

City

TUCSON

State

AZ

Zip Code

85746-3306

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27420287

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR FRANCIS COLLINS

Mailing Address 17020 PARK AVE

City

SONOMA

State

CA

Zip Code

95476-3445

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27420293

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID MYERS

Mailing Address 5111 OSAGE RD

City

WATERLOO

State

IA

Zip Code

50703-9390

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27420391

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 652 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

JAMES DALBY

Mailing Address PO BOX 1242

City

OZONA

State

TX

Zip Code

76943-1242

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27420423

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ERIK RIEGER

Mailing Address 3 GARNIER WAY

City

GLEN MILLS

State

PA

Zip Code

19342-1670

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27420469

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR GREGORY L ALLARD

Mailing Address PO BOX 280

City

STEEP FALLS

State

ME

Zip Code

04085-0280

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27420514

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 653 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

CHRIS WEND

Mailing Address 536 HILLTOP RD

City

HUMMELSTOWN

State

PA

Zip Code

17036-8555

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27420521

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

BETH PHILLIPS

Mailing Address 4391 COLHAM FERRY RD

City

WATKINSVILLE

State

GA

Zip Code

30677-3389

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27420534

Amount of Each Receipt this Period

275.00

C.

Full Name (Last, First, Middle Initial)

MR CHARLES D FESSENDEN

Mailing Address 251 W MEADOW RD

City

BALTIMORE

State

MD

Zip Code

21225-2644

FEC ID number of contributing
federal political committee.

C

Name of Employer
RITTEHOUSE FUEL CO.

Occupation

H.V.A.C. MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27420538

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

595.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 654 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM MEEKS

Mailing Address 7760 EBSON DR

City

N FT MYERS

State

FL

Zip Code

33917-6266

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27420551

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES G WHELOCK

Mailing Address 421 BONNIE CIR

City

HOWELL

State

MI

Zip Code

48843-7901

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAHLE TECHNOLOGY, INC

Occupation

APPLICATIONS ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27420565

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT SMITH

Mailing Address 3120 NW JOHN OLSEN AVE APT 151

City

HILLSBORO

State

OR

Zip Code

97124-7418

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27420568

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 655 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GERALD L SMITH

Mailing Address 1719 CROWN CT

City

TEXAS CITY

State

TX

Zip Code

77591-2216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27420620

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES VANHOOK

Mailing Address 6600 MIAMI BLUFF DR

City

CINCINNATI

State

OH

Zip Code

45227-4239

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF CINCINNATI

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27420633

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS DIANE R SERVIDIO

Mailing Address 321 GLENDALE RD

City

WILBRAHAM

State

MA

Zip Code

01095-2383

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27420650

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 656 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

R J STAEBELL

Mailing Address 33 E HOME RD

City

BOWMANVILLE

State

NY

Zip Code

14026-1040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27420681

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR TIMOTHY J ARMSTRONG

Mailing Address 1188 BURR ST

City

SAINT PAUL

State

MN

Zip Code

55130-3634

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27420781

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)

MR JOSEPH H NESLER

Mailing Address 491 HILL RD

City

WINNETKA

State

IL

Zip Code

60093-4219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27420793

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 657 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LEONARD L KERN

Mailing Address 207 DOUGLAS ST

City

ANNA

State

IL

Zip Code

62906-1813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27420811

Amount of Each Receipt this Period

350.00

B.

Full Name (Last, First, Middle Initial)

JIM FOREMAN

Mailing Address 5348 N STETSON DR

City

PRESCOTT VALLEY

State

AZ

Zip Code

86314-9326

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27420813

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

JIM FOREMAN

Mailing Address 5348 N STETSON DR

City

PRESCOTT VALLEY

State

AZ

Zip Code

86314-9326

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27420814

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 658 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PETER G ILIFF, SR

Mailing Address 620 KNOWLES AVE

City

SOUTHAMPTON

State

PA

Zip Code

18966-4102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27420858

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT L POURIER

Mailing Address 4327 S SANTA LUCIA AVE

City

SIERRA VISTA

State

AZ

Zip Code

85650-9217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED - MILITARY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27420868

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR KENT S HOWE

Mailing Address 1427 WHITE ST

City

ANN ARBOR

State

MI

Zip Code

48104-4346

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27420895

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 659 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LAVERN M COLBECK

Mailing Address PO BOX 5315

City

CLEVELAND

State

TN

Zip Code

37320-5315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27420902

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS PATRICIA A MAY

Mailing Address 1363 FRY RD

City

GREENWOOD

State

IN

Zip Code

46142-1127

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27420923

Amount of Each Receipt this Period

325.00

C.

Full Name (Last, First, Middle Initial)

MR STEPHEN A HOWELL

Mailing Address 12596 S PAINTED PONY TRL

City

VAIL

State

AZ

Zip Code

85641-9547

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27420936

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 660 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD RAUTH

Mailing Address PO BOX 98

City

ALVA

State

WY

Zip Code

82711-0098

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27420942

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MR EUGENE C HEETER

Mailing Address 2604 GEORGE ST

City

ROLLING MEADOWS

State

IL

Zip Code

60008-1711

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

928.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27420956

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID MURRAY

Mailing Address 12537 6495 RD

City

MONTROSE

State

CO

Zip Code

81401-8358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27420984

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 661 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MS SUZANNE J SHELLMAN

Mailing Address 724 S BROADWAY UNIT A

City

REDONDO BEACH

State

CA

Zip Code

90277-4691

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27421021

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES E STANFIELD

Mailing Address 1015 N CURRY PIKE

City

BLOOMINGTON

State

IN

Zip Code

47404-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27421029

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM L ARMIGER

Mailing Address 713 MAIDEN CHOICE LN APT 1206

City

CATONSVILLE

State

MD

Zip Code

21228-3959

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27421038

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 662 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TOM BLOCK

Mailing Address 687 N SAMSULA DR

City

NEW SMYRNA BEACH

State

FL

Zip Code

32168-8791

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27421143

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ERIC SCHAEFER

Mailing Address 501 S HOFSTETTER ST

City

COLVILLE

State

WA

Zip Code

99114-3341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27421185

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR NILS G TOLLING

Mailing Address 11 STRATHMORE LN

City

WESTPORT

State

CT

Zip Code

06880-4700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

134.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27421190

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 663 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR NILS G TOLLING

Mailing Address 11 STRATHMORE LN

City

WESTPORT

State

CT

Zip Code

06880-4700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27421192

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS MARY MELVIN

Mailing Address PO BOX 3222

City

CARY

State

NC

Zip Code

27519-3222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27421210

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR BOBBIE POWERS

Mailing Address 4549 WOOD RIVER DR

City

FAIRBANKS

State

AK

Zip Code

99709-3404

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALASKA DEPT OF TRANSPORTATION

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

388.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27421211

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 664 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JUSTIN THOMAS

Mailing Address 500 WILLOW LN

City

HEREFORD

State

TX

Zip Code

79045-2819

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27421238

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID HUNSINGER

Mailing Address 636 COUNTY ROAD 1100 N

City

CARMI

State

IL

Zip Code

62821-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27421240

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN JOHNCK

Mailing Address 44 POTOMAC ST

City

SAN FRANCISCO

State

CA

Zip Code

94117-3323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27421295

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

725.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 665 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR REYES AMADOR

Mailing Address 1335 ORTIZ DR SE APT 10

City

ALBUQUERQUE

State

NM

Zip Code

87108-3793

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27421310

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR RON RIGGS

Mailing Address 7060 W MEADOWBROOK LOOP

City

COEUR D ALENE

State

ID

Zip Code

83814-7911

FEC ID number of contributing
federal political committee.

C

Name of Employer
RON RIGGS ELECTRIC, INC

Occupation

ELECTRICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27421330

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR RICK LEASURE

Mailing Address 11355 BACKUS RD

City

WATTSBURG

State

PA

Zip Code

16442-9747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27421346

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 666 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR DMITRY ZASLAVSKY

Mailing Address 8 HARMONY RD

City State Zip Code
WARREN NJ 07059-5623

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27421361

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)
MR DOUGLAS S WILHELM

Mailing Address 6841 STERLING RD

City State Zip Code
LYNN MI 48097-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27421385

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)
MR THOMAS BIRMINGHAM

Mailing Address 1419 11TH AVE

City State Zip Code
SACRAMENTO CA 95818-4119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27421423

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

795.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TIM BURRIDGE

Mailing Address PO BOX 1176

City

CASPER

State

WY

Zip Code

82602-1176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27421445

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR TRAVIS ALLEN

Mailing Address RR 5 BOX 301A

City

MCALESTER

State

OK

Zip Code

74501-9336

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27421505

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

TERRANCE A SLATE

Mailing Address 319 BLOSSOMWOOD DR

City

LEAGUE CITY

State

TX

Zip Code

77573-6205

FEC ID number of contributing
federal political committee.

C

Name of Employer

LYONDELL CHEMICAL COMPANY

Occupation

CHEMICAL PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27421535

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 668 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BARRY BENECKE

Mailing Address PO BOX 245

City

SAINT GERMAIN

State

WI

Zip Code

54558-0245

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27421552

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES K POWELL

Mailing Address PO BOX 20726

City

BAKERSFIELD

State

CA

Zip Code

93390-0726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27421581

Amount of Each Receipt this Period

65.00

C.

Full Name (Last, First, Middle Initial)

MR ROGER POCHOP

Mailing Address 32655 291ST ST

City

DALLAS

State

SD

Zip Code

57529-6000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27421596

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 669 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVE HUEBNER

Mailing Address 778 FOUR WATERS DR

City

SUNRISE BEACH

State

MO

Zip Code

65079-7856

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27421610

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR DAVE HUEBNER

Mailing Address 778 FOUR WATERS DR

City

SUNRISE BEACH

State

MO

Zip Code

65079-7856

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27421612

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR KENT WALTERS

Mailing Address 550 CHARTER ST APT 5

City

REDWOOD CITY

State

CA

Zip Code

94063-2940

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27421616

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 670 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GLENN PETERSON

Mailing Address 30975 IVYWOOD TRL

City

STACY

State

MN

Zip Code

55079-9283

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	0	/	2	0	0	8

Transaction ID: 27421623

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR SCOTT SMITH

Mailing Address 285 CARY DR

City

AUBURN

State

AL

Zip Code

36830-3005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	8

Transaction ID: 27421653

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR BRIAN M CORCORAN

Mailing Address 22 MAGNOLIA AVE

City

DENVER

State

NJ

Zip Code

07834-9328

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27421671

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 671 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ORLANDO LOPEZ

Mailing Address 8701 SHORELINE DR

City

JONESBORO

State

GA

Zip Code

30236-4077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27421685

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR THEODORE L DUVIGNEAUD

Mailing Address 1125 FICKEWIRTH AVE

City

LA PUENTE

State

CA

Zip Code

91744-2026

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27421714

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR LARRY E COCHRAN

Mailing Address 4444 ECK LN

City

AUSTIN

State

TX

Zip Code

78734-1625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27421720

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 672 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GARY P DEEVERS

Mailing Address 215 REEVES AVE

City

FAIRMONT

State

WV

Zip Code

26554-4267

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEPT OF JUSTICE - FBI

Occupation

CRIMINAL HISTORY REQUEST EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27421780

Amount of Each Receipt this Period

80.00

B.

Full Name (Last, First, Middle Initial)

MR RICHARD N ANDERSON

Mailing Address 602 LEWIS ST

City

DEKALB

State

IL

Zip Code

60115-3479

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27421787

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

JOHNNY SMITH

Mailing Address 140 GUILFORD LN

City

PRATTVILLE

State

AL

Zip Code

36066-5128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27421842

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

480.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 673 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR CHARLES KASKA

Mailing Address 55 LOOKOVER LN

City

YARDLEY

State

PA

Zip Code

19067-1520

FEC ID number of contributing
federal political committee.

C

Name of Employer
DELAWARE VALLEY FORENSIC

Occupation

FORENSIC PSYCHOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27421844

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD C MARSHALL

Mailing Address 6282 SMOKER RD

City

CENTERVILLE

State

IN

Zip Code

47330-9746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27421878

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS MELVA BALL

Mailing Address PO BOX 348

City

STANTON

State

NE

Zip Code

68779-0348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27421887

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 674 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ED JOHNSON

Mailing Address 6301 VALLEYBROOK DR

City

MECHANICSBURG

State

PA

Zip Code

17050-7300

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27421891

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR ARIC J FOSTER

Mailing Address 1452 W NORTH BEND RD APT 23

City

CINCINNATI

State

OH

Zip Code

45224-2549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: 27421892

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR ARIC J FOSTER

Mailing Address 1452 W NORTH BEND RD APT 23

City

CINCINNATI

State

OH

Zip Code

45224-2549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27421894

Amount of Each Receipt this Period

220.00

SUBTOTAL of Receipts This Page (optional)

490.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 675 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ARIC J FOSTER

Mailing Address 1452 W NORTH BEND RD APT 23

City

CINCINNATI

State

OH

Zip Code

45224-2549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27421895

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR WILL RUSH

Mailing Address 5543 STATE HIGHWAY 209

City

MCALISTER

State

NM

Zip Code

88427-9747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27421904

Amount of Each Receipt this Period

325.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN F RASMUSSEN

Mailing Address 1309 DONALD AVE

City

ROYAL OAK

State

MI

Zip Code

48073-2091

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27421927

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 676 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GENE L ALDRIDGE

Mailing Address 3224 STALEY STORE RD

City

LIBERTY

State

NC

Zip Code

27298-9500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27422034

Amount of Each Receipt this Period

325.00

B.

Full Name (Last, First, Middle Initial)

DAVID E KONECNIK

Mailing Address 116 LANDMARK APARTMENTS W

City

NEWTON

State

NJ

Zip Code

07860-1107

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTURY TUBE CORP.

Occupation

MAINTENANCE SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27422102

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR JACKIE L TOMLINSON

Mailing Address 203 PERRY DR

City

GOLDSBORO

State

NC

Zip Code

27530-8449

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27422104

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

465.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 677 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR TEDDY DAVIS

Mailing Address PO BOX 1001

City

CADIZ

State

KY

Zip Code

42211-1001

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 8

Transaction ID: 27422120

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR DON TWYMAN

Mailing Address 930 HAMILTON RD

City

LEBANON

State

TN

Zip Code

37087-7350

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANESTHESIA SERVICES

Occupation
ANESTHESIOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27422211

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR DOUGLAS S BEYER

Mailing Address 21335 NW CLEAR CUT DR

City

BANKS

State

OR

Zip Code

97106-7454

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27422222

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 678 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL K NICOLAI

Mailing Address 332 2ND AVE S

City

NEW ROCKFORD

State

ND

Zip Code

58356-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27422224

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT M WYNNE

Mailing Address 5703 FENWAY

City

MIDLAND

State

TX

Zip Code

79707-5045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27422263

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR KEVIN M DELCAMBRE

Mailing Address 207 EUGENIE DR

City

DUSON

State

LA

Zip Code

70529-4315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27422379

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 679 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BRUCE CARLSON

Mailing Address 33 HILL FARM CIR

City

SAINT PAUL

State

MN

Zip Code

55127-2010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	8

Transaction ID: 27422386

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR CHRISTOPHER J MALONE

Mailing Address 2414 COUNTY ROAD 90 APT 224

City

PEARLAND

State

TX

Zip Code

77584-4874

FEC ID number of contributing
federal political committee.

C

Name of Employer

AUDUBON ENGINEER COMPANY

Occupation

MECHANICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27422387

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD DONHAM

Mailing Address 4214 BROOKSIDE RD

City

OTTAWA HILLS

State

OH

Zip Code

43606-2315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

Transaction ID: 27422396

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 680 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES F BERKENBUSH

Mailing Address 253 PEPPERTREE LOOP

City

ANCHORAGE

State

AK

Zip Code

99504-4843

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27422408

Amount of Each Receipt this Period

325.00

B.

Full Name (Last, First, Middle Initial)

MR CARL SMITH

Mailing Address 1027 ASHE ST

City

DAVIDSONVILLE

State

MD

Zip Code

21035-1215

FEC ID number of contributing
federal political committee.

C

Name of Employer
GUARDIAN TECHNOLOGIES

Occupation

MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27422493

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD SPITLER

Mailing Address 9918 PREVATT ST

City

GIBSONTON

State

FL

Zip Code

33534-4600

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27422499

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

415.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 681 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD SPITLER

Mailing Address 9918 PREVATT ST

City

GIBSONTON

State

FL

Zip Code

33534-4600

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

DISABLED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27422502

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR THEODORE A FISCHER, JR

Mailing Address PO BOX 344

City

WATERFORD

State

VA

Zip Code

20197-0344

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27422558

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

ELLI MICHAELS

Mailing Address 9921 ALLISON CT

City

PAHRUMP

State

NV

Zip Code

89048-8310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27422604

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 682 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JACK D FRERICH

Mailing Address PO BOX 96

City

BRACKETTVILLE

State

TX

Zip Code

78832-0096

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27422648

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR DAN SERGIACOMI

Mailing Address PO BOX 657

City

POINT LOOKOUT

State

NY

Zip Code

11569-0657

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27422679

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES A SCHREIBER

Mailing Address W10965 US HIGHWAY 8 TRLR 13

City

BRUCE

State

WI

Zip Code

54819-9559

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27422763

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 683 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES A SCHREIBER

Mailing Address W10965 US HIGHWAY 8 TRLR 13

City

BRUCE

State

WI

Zip Code

54819-9559

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27422765

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

MR KERMIT KYLE

Mailing Address 5310 FORT SUTTER WAY

City

SACRAMENTO

State

CA

Zip Code

95841-2114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27422768

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

GARY B ROGERS

Mailing Address 2833 RINGGOLD DR

City

APEX

State

NC

Zip Code

27539-7431

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMC CORPORATION

Occupation

SENIOR PRODUCTION COORD

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27422804

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

191.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 684 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HARVEY G CHAPPELL

Mailing Address 4360 HORSE RD

City

ROCK HILL

State

SC

Zip Code

29730-7277

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27422825

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MR FLOYD B HANNA

Mailing Address 1717 STATE ST

City

CAYCE

State

SC

Zip Code

29033-4051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27422924

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JEFF CHINDLUND

Mailing Address 1020 630TH ST

City

STORM LAKE

State

IA

Zip Code

50588-7538

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27422933

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 685 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CAL NIEMELA

Mailing Address 20191 BOUNDARY RD

City

CHASSELL

State

MI

Zip Code

49916-9146

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27422971

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

JOHN L ZEROLIS

Mailing Address 5418 N OCTAVIA AVE

City

CHICAGO

State

IL

Zip Code

60656-1831

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27423117

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

MR KEITH HUNT

Mailing Address PO BOX 8024

City

NEW CASTLE

State

PA

Zip Code

16107-8024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27423127

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 686 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

BRENDA M RICH

Mailing Address 3640 KANNAH CREEK RD

City

WHITEWATER

State

CO

Zip Code

81527-9661

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27423139

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

MR GLENN PARKER

Mailing Address 56 RANDOLPH ST

City

ARLINGTON

State

MA

Zip Code

02474-6635

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 0 8

Transaction ID: 27423143

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR RALPH E STALEY

Mailing Address 449 BARNETTE RD

City

LOUISBURG

State

NC

Zip Code

27549-7604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27423184

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 687 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL K LOTT

Mailing Address 513 POOLE RD

City

ELM GROVE

State

LA

Zip Code

71051-9293

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27423216

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

WALLACE BURSON

Mailing Address 66125 HIGHWAY 22

City

ROANOKE

State

AL

Zip Code

36274-3511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27423223

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR FRANCIS KRUMM

Mailing Address 8855 22ND AVE SE

City

HAGUE

State

ND

Zip Code

58542-9441

FEC ID number of contributing
federal political committee.

C

Name of Employer
HAGUE ELEVATOR COMPANY

Occupation

OWNER / OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27423226

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 688 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ARTHUR G WILLS

Mailing Address 10010 KOPPLIN RD

City

NEW BRAUNFELS

State

TX

Zip Code

78132-4649

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27423261

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR WARREN L DOONAN

Mailing Address PO BOX 216

City

HOISINGTON

State

KS

Zip Code

67544-0216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27423272

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR HARRY KARLE

Mailing Address 5237 HIGHWAY 77

City

CHIPLEY

State

FL

Zip Code

32428-7317

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27423339

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

315.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 689 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

TERRY SCHMIDT

Mailing Address 2301 LOGAN RD

City

OCEAN

State

NJ

Zip Code

07712-3635

FEC ID number of contributing
federal political committee.

C

Name of Employer
KRELL TECHNOLOGIES

Occupation

FIBER OPTIC TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27423341

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

TERRY SCHMIDT

Mailing Address 2301 LOGAN RD

City

OCEAN

State

NJ

Zip Code

07712-3635

FEC ID number of contributing
federal political committee.

C

Name of Employer
KRELL TECHNOLOGIES

Occupation

FIBER OPTIC TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27423342

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

DR CLIFFORD C CLOONAN

Mailing Address 83 ASHTON ST

City

CARLISLE

State

PA

Zip Code

17015-9137

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27423356

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 690 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HAROLD NETTER

Mailing Address 2114 ORESTES WAY

City

CAMPBELL

State

CA

Zip Code

95008-2614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27423357

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES MASON

Mailing Address 4810 NEWBERN RD

City

PULASKI

State

VA

Zip Code

24301-6931

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27423362

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR JOE A MILLER

Mailing Address 906 DAVIS RD

City

LEAGUE CITY

State

TX

Zip Code

77573-2828

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27423383

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 691 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

TIM BOYD

Mailing Address 7602 WOODRIDGE CIR

City

MERIDIAN

State

MS

Zip Code

39305-8101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27423441

Amount of Each Receipt this Period

325.00

B.

Full Name (Last, First, Middle Initial)

MR BRYAN P WU

Mailing Address 3323 EDGEWATER DR

City

MEDFORD

State

OR

Zip Code

97504-8489

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27423467

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID D MELLENCAMP, MD

Mailing Address 9409 PRINCE CHARLES

City

AUSTIN

State

TX

Zip Code

78730-3466

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27423483

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 692 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR OMAR S GRIFFIN, JR

Mailing Address 11377 HIGHWAY 10

City

GLYNDON

State

MN

Zip Code

56547-9587

FEC ID number of contributing
federal political committee.

C

Name of Employer
SKOLNESS INC

Occupation

FARM LABOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27423493

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR MIKE SCHOBBER

Mailing Address 4136 N OKETO AVE

City

NORRIDGE

State

IL

Zip Code

60706-1107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27423498

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MR WALTER V HOSMER

Mailing Address 118 FAIRVIEW DR

City

CHILDERSBURG

State

AL

Zip Code

35044-1101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27423552

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 693 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAY BRAND

Mailing Address PO BOX 1233

City

CONDON

State

MT

Zip Code

59826-1233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27423596

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES A RUMBLEY

Mailing Address 909 MOCKINGBIRD LN

City

ECLECTIC

State

AL

Zip Code

36024-6351

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S.A.F

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27423601

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIE TIDEWELL

Mailing Address 16705 NORWOOD DR

City

TAMPA

State

FL

Zip Code

33624-1170

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27423612

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 694 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DENNIS DOUGHERTY

Mailing Address 6 HIBBERT CT

City

PACIFICA

State

CA

Zip Code

94044-1915

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOCAL UNION 377

Occupation

IRONWORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27423616

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR NOEL BOYKIN

Mailing Address 27325 ROAD M.7

City

DOLORES

State

CO

Zip Code

81323-9481

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27423669

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL W NICHOLS

Mailing Address 5940 CEDAR CT NE

City

HANSVILLE

State

WA

Zip Code

98340-9707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27423705

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 695 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WAYNE SANDERS

Mailing Address PO BOX 853

City

GOODLETTSVILLE

State

TN

Zip Code

37070-0853

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27423721

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

DAVID E BUNTING

Mailing Address 12429 SALMON RIVER RD

City

SAN DIEGO

State

CA

Zip Code

92129-3546

FEC ID number of contributing
federal political committee.

C

Name of Employer
BUNTING BROS

Occupation

GENERAL PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27423754

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR HAROLD H BEADLING

Mailing Address 1602 BROOKSIDE AVE

City

WAUKEGAN

State

IL

Zip Code

60085-3612

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

178.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27423778

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 696 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HAROLD H BEADLING

Mailing Address 1602 BROOKSIDE AVE

City

WAUKEGAN

State

IL

Zip Code

60085-3612

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27423780

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR KEN BRISTOL

Mailing Address 157 S ARLINGTON AVE

City

ELMHURST

State

IL

Zip Code

60126-3501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED - BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27423813

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT J FAUST

Mailing Address 2014 RIVERLAWN DR

City

HUMBLE

State

TX

Zip Code

77339-2374

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27423819

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 697 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MARSHALL PHAROAH

Mailing Address 1026 FARNES RD

City

CANTON

State

NY

Zip Code

13617-3728

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27423823

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR KELLY ROBERTS

Mailing Address 1110 9TH ST

City

SHALLOWATER

State

TX

Zip Code

79363-5734

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27423846

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR GERALD POMEROY

Mailing Address 3731 N MONTANA AVE

City

FLORENCE

State

AZ

Zip Code

85232-8537

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27423853

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 698 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DALLAS BURROW

Mailing Address 116 JEANNETTE DR

City

MULVANE

State

KS

Zip Code

67110-1029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27423909

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES G GANSEL

Mailing Address 1703 BROOKSHIRE RUN

City

PT OF ROCKS

State

MD

Zip Code

21777-2011

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	8

Transaction ID: 27423954

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

CAPT JAMES M DUNLOP, USN RET

Mailing Address 1007 MARVONE LN

City

NEPTUNE BEACH

State

FL

Zip Code

32266-3615

FEC ID number of contributing
federal political committee.

C

Name of Employer

US NAVY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27423984

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 699 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOSE FREIRE

Mailing Address 104 LOMBARDY ST

City

BROOKLYN

State

NY

Zip Code

11222-5306

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27424074

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ANTHONY MERLENO

Mailing Address 4189 HAMILTON RD

City

MEDINA

State

OH

Zip Code

44256-9087

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27424088

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN KNARVIK

Mailing Address 18 LEIV EIRIKSON AVE

City

PRINCETON

State

NJ

Zip Code

08540-8401

FEC ID number of contributing
federal political committee.

C

Name of Employer

GARDA

Occupation

GUARD/MESSENGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 27424111

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 700 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES BEACH

Mailing Address 7281 SWEDETOWN RD

City

THEODORE

State

AL

Zip Code

36582-6173

FEC ID number of contributing
federal political committee.

C

Name of Employer
DON GARRIS

Occupation

PLANT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27424147

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MS LETTIE CURRAN

Mailing Address 725 COUNTY ROAD 124

City

GEORGETOWN

State

TX

Zip Code

78626-1929

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27424157

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

TSUKASA HATAKEYAMA

Mailing Address 285 OXFORD ST APT 18

City

ROCHESTER

State

NY

Zip Code

14607-2775

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27424214

Amount of Each Receipt this Period

48.00

SUBTOTAL of Receipts This Page (optional)

123.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 701 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES HERMERDING

Mailing Address 2321 TAPESTRY DR

City

LIVERMORE

State

CA

Zip Code

94550-8246

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27424216

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR DON ARMSTRONG

Mailing Address 5906 GLEAM CT

City

AGOURA HILLS

State

CA

Zip Code

91301-2117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27424300

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MS EVE G ANDERSON

Mailing Address PO BOX 25550

City

HONOLULU

State

HI

Zip Code

96825-0550

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27424344

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

580.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 702 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHRISTOPHER SZALA

Mailing Address 5 GLEN AVE UNIT 5

City

SCHENECTADY

State

NY

Zip Code

12302-2546

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27424473

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN ALLGYER, JR

Mailing Address 262 CUT RD

City

GAP

State

PA

Zip Code

17527-9773

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27424479

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR FRANK H MEYER, SR

Mailing Address 14444 DUVAL RD

City

JACKSONVILLE

State

FL

Zip Code

32218-2477

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27424484

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 703 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS J KELLY

Mailing Address 5211 ARQUILLA DR

City

RICHTON PARK

State

IL

Zip Code

60471-1519

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOVERNORS STATE UNIV

Occupation

PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27424500

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT R MC CLURE

Mailing Address PO BOX 458

City

MC LEANSVILLE

State

NC

Zip Code

27301-0458

FEC ID number of contributing
federal political committee.

C

Name of Employer
NUVOX

Occupation

SWITCH TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27424537

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR ALFRED L FRAHM

Mailing Address 140 TIERRA ENCANTADA

City

CORRALES

State

NM

Zip Code

87048-6806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27424625

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

1090.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 704 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR BARRY J ZIMMERMAN

Mailing Address 1590 SW 8TH AVE

City

BOCA RATON

State

FL

Zip Code

33486-6921

FEC ID number of contributing
federal political committee.

C

Name of Employer

STRYKER ELECTRICAL CONTRA-
CTING

Occupation

PROJECT MANAGER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27424643

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ALLAN L WETTER

Mailing Address 1830 ERIN WAY

City

TURLOCK

State

CA

Zip Code

95382-9202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27424714

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN A BOOSE

Mailing Address 957 STOVALL RD

City

WALLA WALLA

State

WA

Zip Code

99362

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27424752

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 705 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR W H WALKER, III

Mailing Address 7952 MERCER RD

City

BROWNSVILLE

State

TN

Zip Code

38012-8753

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27424774

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ERIC DRESSER

Mailing Address 426 S VARNEY ST

City

BURBANK

State

CA

Zip Code

91502-2124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27424845

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR ERIC DRESSER

Mailing Address 426 S VARNEY ST

City

BURBANK

State

CA

Zip Code

91502-2124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27424847

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 706 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DAVID P SUMRALL

Mailing Address 27522 NW 193RD AVE

City

HIGH SPRINGS

State

FL

Zip Code

32643-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27424854

Amount of Each Receipt this Period

325.00

B.

Full Name (Last, First, Middle Initial)

MR N L HERVEY

Mailing Address 114 KENNEDY LN

City

BUTLER

State

PA

Zip Code

16002-3613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27424869

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

CHARLES E MATTHEWS

Mailing Address 535 W 3RD ST

City

DOVER

State

OH

Zip Code

44622-3154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27424912

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)

465.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 707 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR SEAN HARDESTY

Mailing Address 7777 GREENBRIAR ST APT 3081

City

HOUSTON

State

TX

Zip Code

77030-4535

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27424927

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR EDWARD BOHMANN

Mailing Address 257 MIDLAND AVE

City

POMPTON LAKES

State

NJ

Zip Code

07442-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer
N.Y. CITY TRANSIT AUTHORITY

Occupation
RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27424934

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

MR BOBBY WILLIAMSON

Mailing Address 380 MINT RD

City

NEW MARKET

State

AL

Zip Code

35761-8646

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27424948

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 708 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ANTHONY GIAMMARCO

Mailing Address 19307 PAWNEE AVE

City

CLEVELAND

State

OH

Zip Code

44119-2214

FEC ID number of contributing
federal political committee.

C

Name of Employer

CITY OF CLEVELAND

Occupation

PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27424966

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

DONALD P REED

Mailing Address 18875 RAYSTOWN ROAD

City

JAMES CREEK

State

PA

Zip Code

16657-9516

FEC ID number of contributing
federal political committee.

C

Name of Employer

PA DEPT OF CORRECTIONS

Occupation

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27424970

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

DR MIKE PAPPAS

Mailing Address 9444 EVIEDALE RD

City

SYLVANIA

State

OH

Zip Code

43560-9285

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27425035

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 709 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

TIMOTHY L WISECARVER

Mailing Address PO BOX 58834

City

PHILA

State

PA

Zip Code

19102-8834

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27425121

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

TIMOTHY L WISECARVER

Mailing Address PO BOX 58834

City

PHILA

State

PA

Zip Code

19102-8834

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

Transaction ID: 27425122

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MARVIN WITTROCK

Mailing Address 136 S RINGGOLD ST

City

BOONE

State

IA

Zip Code

50036-3865

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 27425183

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 710 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

PHILLIP G CHAVEZ

Mailing Address 925 GARDNER AVE

City

CORCORAN

State

CA

Zip Code

93212-2412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27425185

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT HERRLE

Mailing Address 14255 DELWOOD DR

City

ELBERT

State

CO

Zip Code

80106-8882

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27425258

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN WAHL

Mailing Address 1835 E 5TH ST

City

PORT ANGELES

State

WA

Zip Code

98362-4919

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE BOEING COMPANYOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 27425277

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 711 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

WILLIAM HOOSTY

Mailing Address 56 BLACKBURN CT

City

NEW HARTFORD

State

NY

Zip Code

13413-2806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27425371

Amount of Each Receipt this Period

275.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT SHRECK

Mailing Address 3131 FLEUR DR UNIT 704

City

DES MOINES

State

IA

Zip Code

50321-1741

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27425383

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM TOWNSEND

Mailing Address 124 NORTHWOOD DR

City

LUTHERVILLE

State

MD

Zip Code

21093-4303

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27425391

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 712 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MARINO CAMAIONI

Mailing Address 9317 S ALDER DR

City

TEMPE

State

AZ

Zip Code

85284-3367

FEC ID number of contributing
federal political committee.

C

Name of Employer
ABC ANESTHESIOLOGISTS

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.66

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27425429

Amount of Each Receipt this Period

32.42

B.

Full Name (Last, First, Middle Initial)

MR GEORGE R MATTHEWS

Mailing Address 8628 TOURMALINE BLVD

City

BOYNTON BEACH

State

FL

Zip Code

33437-2420

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27425437

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR LEEROY KNUPP

Mailing Address 25676 E COUNTY HIGHWAY 27

City

CANTON

State

IL

Zip Code

61520-8963

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27425441

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

162.42

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 713 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HARRISTAYLOR BURFORD, III

Mailing Address PO BOX 37

City

STONEWALL

State

LA

Zip Code

71078-0037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27425444

Amount of Each Receipt this Period

85.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID RAFANELLI

Mailing Address 6470 WINE CREEK RD

City

HEALDSBURG

State

CA

Zip Code

95448-9115

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Transaction ID: 27425452

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR E MORRELL

Mailing Address 5247 LEMON GULCH DR

City

CASTLE ROCK

State

CO

Zip Code

80108-7525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27425461

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

610.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 714 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR AL TALL

Mailing Address 19727 216TH AVE NE

City

WOODINVILLE

State

WA

Zip Code

98077-7108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27425510

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN SCHONEWILL

Mailing Address PO BOX 2807

City

MONUMENT

State

CO

Zip Code

80132-2944

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE QUALITY HOMES

Occupation
OWNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27425524

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR AL SLATTERY

Mailing Address 301 W PLATT DR

City

YUKON

State

OK

Zip Code

73099-5219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27425533

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

595.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 715 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ED ARIZPE

Mailing Address 3276 QUINTO WAY

City

SAN JOSE

State

CA

Zip Code

95124-2344

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27425580

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DANNY R BOYD

Mailing Address PO BOX 250

City

MILTON

State

LA

Zip Code

70558-0250

FEC ID number of contributing
federal political committee.

C

Name of Employer
L & D COMMUNITY CARS

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27425604

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR LAWRENCE BENN

Mailing Address 1540 NEWELL RD

City

RICHMOND

State

VA

Zip Code

23225-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
DISABLED VETERAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27425618

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 716 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN POWELL

Mailing Address 1813 SE 9TH ST

City

FT LAUDERDALE

State

FL

Zip Code

33316-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer

POWELL BROS BARGE TERMINAL

Occupation

YACHT DOCKAGE FACILITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27425627

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH G OGIE

Mailing Address 1753 S 83RD ST

City

MILWAUKEE

State

WI

Zip Code

53214-4431

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27425651

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR STEVE HERBST

Mailing Address 27268 COUNTY ROAD 42

City

KERSEY

State

CO

Zip Code

80644-9130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27425700

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 717 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FRED BELLMAN

Mailing Address 6890 VALLEY FOREST DR

City

CUMMING

State

GA

Zip Code

30041-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27425711

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MR RODNEY E SATTLER

Mailing Address 2132 ROAD V

City

READING

State

KS

Zip Code

66868-9036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27425808

Amount of Each Receipt this Period

275.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN GULBRANDSEN

Mailing Address 850 S LORRAINE RD APT 1G

City

WHEATON

State

IL

Zip Code

60187-6918

FEC ID number of contributing
federal political committee.

C

Name of Employer
DUPAGE COUNTY SHERIFF'S
POLICE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27425810

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

485.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 718 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES H MARTIN

Mailing Address 14111 W YOSEMITE DR

City

SUN CITY WEST

State

AZ

Zip Code

85375-5646

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27425825

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

WAYNE H FINK

Mailing Address 1440 N LAKE SHORE DR APT 14D

City

CHICAGO

State

IL

Zip Code

60610-5910

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27425891

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES D BOYLE, SR

Mailing Address 2801 PICKETT DR

City

LEAGUE CITY

State

TX

Zip Code

77573-4855

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27425925

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

1230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 719 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD SAUERBIER

Mailing Address 115 ARDELL DR

City

KALISPELL

State

MT

Zip Code

59901-2200

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27425981

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR BRYAN KOONTZ

Mailing Address 3515 GREAT COVE RD

City

WARFORDSBURG

State

PA

Zip Code

17267-8534

FEC ID number of contributing
federal political committee.

C

Name of Employer
BASK PROPERTIES, LTD

Occupation
REAL ESTATE INVESTOR/DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27425982

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WAYNE ADAMS

Mailing Address 1319 N 725 W

City

OREM

State

UT

Zip Code

84057-5904

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27425993

Amount of Each Receipt this Period

22.00

SUBTOTAL of Receipts This Page (optional)

142.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 720 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHARLES HELMBOLD

Mailing Address 121 FIELDSTONE LN

City

SPRINGFIELD

State

TN

Zip Code

37172-7342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27426022

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES HELMBOLD

Mailing Address 121 FIELDSTONE LN

City

SPRINGFIELD

State

TN

Zip Code

37172-7342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27426023

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR MANUEL BASULTO

Mailing Address 1431 FLORIBUNDA AVE APT 3

City

BURLINGAME

State

CA

Zip Code

94010-3838

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27426043

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 721 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GREG PALMER

Mailing Address 4839 FOXSHIRE CIR

City

TAMPA

State

FL

Zip Code

33624-4309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27426052

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR STEPHEN LEDOUX

Mailing Address 9 FARMER ST

City

CANTON

State

NY

Zip Code

13617-1120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUNY-CTC

Occupation

COLLEGE PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27426083

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MR STEPHEN LEDOUX

Mailing Address 9 FARMER ST

City

CANTON

State

NY

Zip Code

13617-1120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUNY-CTC

Occupation

COLLEGE PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27426085

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

395.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 722 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM J BRAND

Mailing Address 506 COVE DR

City

DENTON

State

TX

Zip Code

76208-7114

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27426108

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR BOBBY REDD

Mailing Address 7397 N BILBO RD

City

ORANGE

State

TX

Zip Code

77632-4001

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27426156

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN A KURTZ

Mailing Address 121 HAMILTON AVE

City

VANDERGRIFT

State

PA

Zip Code

15690-1121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27426178

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 723 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAYTON DUEHR

Mailing Address S44W33405 CONNEMARA DR

City

DOUSMAN

State

WI

Zip Code

53118-9602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27426228

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT C GREGORY

Mailing Address 71 HUNTER LN

City

RIDGEFIELD

State

CT

Zip Code

06877-4211

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27426271

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

CODY COPELAND

Mailing Address 11202 N ECHO LN

City

FAIR GROVE

State

MO

Zip Code

65648-8349

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27426329

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 724 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL BOSSERMAN

Mailing Address 2247 CHESTNUT RD

City

YORK

State

PA

Zip Code

17408-4164

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27426369

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR CHRIS DEWS

Mailing Address 4940 HIGHWAY 82 E

City

MAGNOLIA

State

AR

Zip Code

71753-9691

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27426378

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JONATHAN WHITE

Mailing Address 949 ARBOR DOWNS DR

City

PLANO

State

TX

Zip Code

75023-6701

FEC ID number of contributing
federal political committee.

C

Name of Employer
ION GEOPHYSICAL

Occupation

SENIOR TECHNICIAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27426447

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 725 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS H LAMOREAUX

Mailing Address 20057 BRETON RD

City

SPRING LAKE

State

MI

Zip Code

49456-9425

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	8

Transaction ID: 27426454

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR NORMAN GRIFFITH

Mailing Address 2704 SHAMROCK DR

City

MORROW

State

OH

Zip Code

45152-9509

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOME DEPOTOccupation
PART TIME SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	8

Transaction ID: 27426507

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR TIMOTHY BYRD

Mailing Address 377 WASCOM RD

City

BOGALUSA

State

LA

Zip Code

70427-6507

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	8

Transaction ID: 27426515

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 726 / 1300
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MRS ANITA E CHANDLER

Mailing Address PO BOX 3219

City

SEQUIM

State

WA

Zip Code

98382-5014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27426571

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR HOWARD S MITNICK

Mailing Address 1601 LOCUST ST UNIT 300

City

PHILA

State

PA

Zip Code

19102-3348

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27426631

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR ANTONY J MARTINEZ

Mailing Address 1355 W 2950 S

City

BRIGHAM CITY

State

UT

Zip Code

84302-4254

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27426643

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 727 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

DR MARK A HAIDEKKER

Mailing Address 870 RIVERBEND PKWY

City

ATHENS

State

GA

Zip Code

30605-2670

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27426665

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR ALLEN R COPLIN

Mailing Address PO BOX 44

City

BONNE TERRE

State

MO

Zip Code

63628-0044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27426710

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR STEVE NICHOLS

Mailing Address 190 FAIRWAY OAKS LN

City

SEDONA

State

AZ

Zip Code

86351-8835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27426735

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 728 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DARRELL BATES

Mailing Address 2804 DUBARRY DR APT 1108

City

GAUTIER

State

MS

Zip Code

39553-6332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27426752

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR TERRY WAYNE ROGERS

Mailing Address 752 SUGAR HILL LN SE

City

CONYERS

State

GA

Zip Code

30094-3744

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROGERS CLASSIC COLLISION

Occupation

BODY SHOP OWNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27426789

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR FRANK R SMITH

Mailing Address 3095 COUNTRY CLUB RD SW

City

LANCASTER

State

OH

Zip Code

43130-8937

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27426856

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 729 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MS VIOLETA ANTONOVA

Mailing Address 309 FOOTHILL BLVD

City

SAN LEANDRO

State

CA

Zip Code

94577-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27426985

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT CRELLER, JR

Mailing Address 423 US ROUTE 2 S

City

ALBURG

State

VT

Zip Code

05440-9640

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27427004

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

DR 7LEGACY PEREZ

Mailing Address 4509 PARKHURST DR

City

BELLINGHAM

State

WA

Zip Code

98229-3392

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27427022

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 730 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR STEVE DRICK

Mailing Address 4606 GREENWOOD RD

City

WOODSTOCK

State

IL

Zip Code

60098-8685

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27427025

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES C GATES

Mailing Address 5401 N 400 W

City

COLUMBUS

State

IN

Zip Code

47201-9505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27427032

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR NEIL BRISTOL

Mailing Address 143 PARKER RD

City

WEST LONG BRANCH

State

NJ

Zip Code

07764-1018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27427045

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 731 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

STEVEN J PALMATIER

Mailing Address 191 BALF RD

City

NORWICH

State

NY

Zip Code

13815-3636

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

COMMUNITY ORGANIZER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27427072

Amount of Each Receipt this Period

275.00

B.

Full Name (Last, First, Middle Initial)

MR BRUCE MEDLIN

Mailing Address 3655 LA BONITA DR SE

City

DEMING

State

NM

Zip Code

88030-8157

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27427110

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MS SUSAN SHEA-GERSON

Mailing Address 75 DINGLETOWN RD

City

GREENWICH

State

CT

Zip Code

06830-3516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27427114

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 732 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

FRY MATT

Mailing Address 28407 E ORIENT CEMETERY RD

City

HARRISONVILLE

State

MO

Zip Code

64701-3161

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
ROOFER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27427129

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MS PHYLLIS NEWPORT

Mailing Address 4379 RUTH CANNON LN

City

PERRY

State

FL

Zip Code

32347-8816

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27427162

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

MR DENNIS H MCCANDLESS

Mailing Address 302 EAGLEVIEW CT

City

GIBSONIA

State

PA

Zip Code

15044-8078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27427183

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 733 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KENYON JOSEPH

Mailing Address 1495 TEN ROD RD # 3

City

NORTH KINGSTOWN

State

RI

Zip Code

02852-4121

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIRST STUDENT

Occupation

SCHOOL BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27427189

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES W CHRISTIANSEN

Mailing Address PO BOX 51046
1463 VEGA CIR APT 6

City

IDAHO FALLS

State

ID

Zip Code

83402-1846

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY & US AIR FORCE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27427206

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

JULIA M REAMER

Mailing Address 5001 SNIDER RD

City

CHAMBERSBURG

State

PA

Zip Code

17201-9139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27427274

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 734 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR NEIL HODGE

Mailing Address 1130 BOSTON ST

City

CLARKSTON

State

WA

Zip Code

99403-2580

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 27427277

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR PAUL L CHUPP

Mailing Address 10181 W 900 N

City

ETNA GREEN

State

IN

Zip Code

46524-9733

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27427288

Amount of Each Receipt this Period

18.00

C.

Full Name (Last, First, Middle Initial)

MR MURRAY WRIGHT

Mailing Address 102 EMMONS ST

City

NEW HAVEN

State

MO

Zip Code

63068-1209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27427299

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

143.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 735 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MURRAY WRIGHT

Mailing Address 102 EMMONS ST

City

NEW HAVEN

State

MO

Zip Code

63068-1209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27427301

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR DELBERT E GLASER

Mailing Address 31997 SAND RIDGE RD

City

LEBANON

State

OR

Zip Code

97355-9232

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27427313

Amount of Each Receipt this Period

65.00

C.

Full Name (Last, First, Middle Initial)

MR CHRISTOPHER ROHR

Mailing Address 1557 TOWNSHIP ROAD 81

City

MILLERSBURG

State

OH

Zip Code

44654-9642

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27427330

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 736 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WALTER JAKUBOWSKI

Mailing Address 1816 HOVSONS BLVD

City

TOMS RIVER

State

NJ

Zip Code

08753-1517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27427332

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR GERALD E HARBIN

Mailing Address 5014 E ROVEY AVE

City

PARADISE VALLEY

State

AZ

Zip Code

85253-4131

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: 27427341

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR GREGORY MOORE

Mailing Address 3625 1ST AVE S

City

SEATTLE

State

WA

Zip Code

98134-2201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RAINIER COLD STORAGE, INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27427361

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 737 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN KRAMER

Mailing Address 43 GRAHAMPTON LN

City

GREENWICH

State

CT

Zip Code

06830-3861

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27427371

Amount of Each Receipt this Period

325.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN H RICHARDSON

Mailing Address 1845 N RIVER RD W

City

ALBION

State

IN

Zip Code

46701-9543

FEC ID number of contributing
federal political committee.

C

Name of Employer
KENDALLVILLE IRON & METAL

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27427380

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR RICK WIENS

Mailing Address 541 8TH ST W

City

THIEF RVR FLS

State

MN

Zip Code

56701-1472

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27427397

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

415.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 738 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WALTER EARL

Mailing Address 27 BANNARD ST

City

FREEHOLD

State

NJ

Zip Code

07728-1607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27427428

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR TYLER C POLLOCK

Mailing Address 7 BRETAGNE

City

NEWPORT COAST

State

CA

Zip Code

92657-1032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27427448

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JACOB STOLTZFUS

Mailing Address RR 1 BOX 983

City

BLAIN

State

PA

Zip Code

17006-9419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27427511

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 739 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR GARY FAZIO

Mailing Address 43303 SHOSHONI LOOP

City

FL RIVER MLS

State

CA

Zip Code

96028-9754

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27427570

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MR BILL MORRIS

Mailing Address 290 JENKINS LN

City

GUYS

State

TN

Zip Code

38339-5249

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	8

Transaction ID: 27427576

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR BARRY NEWSOM

Mailing Address 2515 YORKTOWN DR

City

TUSCALOOSA

State

AL

Zip Code

35406-1662

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27427643

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

660.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 740 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD W PARMELEE

Mailing Address 39 OLD QUARRY RD

City

GUILFORD

State

CT

Zip Code

06437-3711

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27427647

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR MATT BALINK

Mailing Address PO BOX 5152

City

SANTA FE

State

NM

Zip Code

87502-5152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27427659

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MR RICHARD M SEIN

Mailing Address 11632 CLAYMONT CIR

City

WINDERMERE

State

FL

Zip Code

34786-5331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27427660

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 741 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ALEXANDER MITCHELL

Mailing Address 264 DAY ST

City

SAN FRANCISCO

State

CA

Zip Code

94131-2417

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27427676

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR TIMOTHY WIGLEY

Mailing Address 415 DUBOIS AVE

City

TWIN FALLS

State

ID

Zip Code

83301-4559

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27427714

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL J BOGART

Mailing Address 710 NW KLINKITAT ST

City

CAMAS

State

WA

Zip Code

98607-9014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27427754

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 742 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL J BOGART

Mailing Address 710 NW KLUICKITAT ST

City

CAMAS

State

WA

Zip Code

98607-9014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27427756

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR JEFIM C PIEKARZ, SR

Mailing Address 701 WESTCHESTER AVE APT 100

City

WHITE PLAINS

State

NY

Zip Code

10604-3002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27427768

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR PETER BLUMBERG

Mailing Address 4723C REELS MILL RD

City

FREDERICK

State

MD

Zip Code

21704-7324

FEC ID number of contributing
federal political committee.

C

Name of Employer
US GOVERNMENT

Occupation
SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27427785

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 743 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JESSE R VOSHELL

Mailing Address 1104 SANDHILL RD

City

LEBANON

State

PA

Zip Code

17046-2832

FEC ID number of contributing
federal political committee.

C

Name of Employer
COUNTY OF LEBANON TRANSIT
AUTH

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27427787

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MR JESSE R VOSHELL

Mailing Address 1104 SANDHILL RD

City

LEBANON

State

PA

Zip Code

17046-2832

FEC ID number of contributing
federal political committee.

C

Name of Employer
COUNTY OF LEBANON TRANSIT
AUTH

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

827.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27427788

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

HALLI MATHENY

Mailing Address 1613 SIENNA DR

City

CEDAR PARK

State

TX

Zip Code

78613-4061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27427797

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 744 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

CHARLES E WILKERSON

Mailing Address 1513 E ELM AVE

City

EL SEGUNDO

State

CA

Zip Code

90245-3220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27427798

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR WALTER JAKUBOWSKI

Mailing Address 1816 HOVSONS BLVD

City

TOMS RIVER

State

NJ

Zip Code

08753-1517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27427804

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR HOWARD CHUCK

Mailing Address 517 LAGUNA HONDA BLVD

City

SAN FRANCISCO

State

CA

Zip Code

94127-1017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27427879

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 745 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM J WYCHANHO

Mailing Address 53 7TH AVE E

City

DICKINSON

State

ND

Zip Code

58601-5335

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27427909

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR KURT A WILLIAMS

Mailing Address PO BOX 746151

City

ARVADA

State

CO

Zip Code

80006-6151

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27427913

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

MOHAMAD RABABEN

Mailing Address 7014 TERNES ST

City

DEARBORN

State

MI

Zip Code

48126-1715

FEC ID number of contributing
federal political committee.

C

Name of Employer
BERRY & SONS ISLAMIC SLAU-
GHTER

Occupation
BUTCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27427973

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 746 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MOHAMAD RABABEN

Mailing Address 7014 TERNES ST

City

DEARBORN

State

MI

Zip Code

48126-1715

FEC ID number of contributing
federal political committee.

C

Name of Employer

BERRY & SONS ISLAMIC SLAU-
GHTER

Occupation

BUTCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27427975

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MOHAMAD RABABEN

Mailing Address 7014 TERNES ST

City

DEARBORN

State

MI

Zip Code

48126-1715

FEC ID number of contributing
federal political committee.

C

Name of Employer

BERRY & SONS ISLAMIC SLAU-
GHTER

Occupation

BUTCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27427977

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES C SEIBERT

Mailing Address 2618 S M ST

City

FORT SMITH

State

AR

Zip Code

72901-5320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27428011

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 747 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RYAN JOHNSON

Mailing Address PO BOX 967

City

HUNTINGTON

State

IN

Zip Code

46750-0967

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 27428034

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DANIEL J HAYES

Mailing Address 126 COTTAGE ST

City

JERSEY CITY

State

NJ

Zip Code

07306-3844

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27428046

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR PERRY L GRESS

Mailing Address 131 MEADOW VALLEY RD

City

EPHRATA

State

PA

Zip Code

17522-1826

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27428072

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 748 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ERIC A WOLDEN

Mailing Address 8039 145TH AVE

City

MILACA

State

MN

Zip Code

56353-4312

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27428133

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR LEONARD PETERSON

Mailing Address 30435 N ALICE CT

City

ATHOL

State

ID

Zip Code

83801-9144

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27428136

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR BOBBY G HARDIN

Mailing Address 451 BEAR CREEK RD

City

PINSON

State

TN

Zip Code

38366-1977

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. POSTAL SERVICE

Occupation

DISTRIBUTION CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27428173

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 749 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID GARSIDE

Mailing Address PO BOX 150447

City

OGDEN

State

UT

Zip Code

84415-0447

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27428255

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR LEWIS SELBY

Mailing Address 4965 TINKHAM AVE

City

ORLANDO

State

FL

Zip Code

32812-1546

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27428272

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR JOSEPH HAMMES, JR

Mailing Address 21950 123RD AVE

City

COLD SPRING

State

MN

Zip Code

56320-4605

FEC ID number of contributing
federal political committee.

C

Name of Employer
SMURFIT STONE CONTAINER
CORP

Occupation

CASCADER TIER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

309.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27428333

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 750 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MIKE WALSH

Mailing Address 7223 MIDWAY RD

City

JACKSONVILLE

State

FL

Zip Code

32244-4615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27428470

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

RONALD DAVIS

Mailing Address 8126 E WILLOWBROOK RD

City

WICHITA

State

KS

Zip Code

67207-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27428478

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID S PARHAM

Mailing Address 5170 JUDY LYNN AVE

City

MEMPHIS

State

TN

Zip Code

38118-2545

FEC ID number of contributing
federal political committee.

C

Name of Employer
D & D PACKAGING INC.

Occupation
SALES REP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27428494

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 751 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHNNY SMETHERS

Mailing Address PO BOX 548

City

MILLSAP

State

TX

Zip Code

76066-0548

FEC ID number of contributing
federal political committee.

C

Name of Employer
M W FAB. LTD.

Occupation

CONTRACT WELDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27428550

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID L EHRHARDT

Mailing Address 2288 GOLDEN OAKS N

City

INDIANAPOLIS

State

IN

Zip Code

46260-5074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27428559

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR BEN KINNEBREW

Mailing Address 1260 GERITY RD

City

BELLINGHAM

State

WA

Zip Code

98229-8958

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27428590

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 752 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

E GRUBBS

Mailing Address 760 SAVOY CLEAR CREEK RD

City

WILLIAMSBURG

State

KY

Zip Code

40769-2600

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27428616

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR BENJAMIN B LAMB

Mailing Address 105 UMBRIA LN

City

OAK RIDGE

State

TN

Zip Code

37830-5240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27428632

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

MR STEFAN MILLER

Mailing Address PO BOX 6196

City

VAIL

State

CO

Zip Code

81658-6196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.99

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27428651

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 753 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR HAROLD BESS

Mailing Address 40 VICTORIA DR

City

FISHERSVILLE

State

VA

Zip Code

22939-2127

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL DYNAMICS INFO. TE-
CHNOL

Occupation

PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27428659

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MARK D LUTHER

Mailing Address 3961 LAUX DR

City

BRIDGETON

State

MO

Zip Code

63044-2118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27428685

Amount of Each Receipt this Period

425.00

C.

Full Name (Last, First, Middle Initial)

MR DAN CRAWFORD

Mailing Address 2718 ANDERSON ST

City

IRVING

State

TX

Zip Code

75062-7103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27428697

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 754 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

GLENN R EATON

Mailing Address 8357 RICHEY SCHOOL RD

City

HANOVERTON

State

OH

Zip Code

44423-9743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27428711

Amount of Each Receipt this Period

85.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN W CONOLLY

Mailing Address 2864 TRUMAN DR

City

HATFIELD

State

PA

Zip Code

19440-3442

FEC ID number of contributing
federal political committee.

C

Name of Employer

EUCLID OIL

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27428752

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

TERRY KISER

Mailing Address 5815 SCHILLING HILL RD NW

City

NEW PHILA

State

OH

Zip Code

44663-9131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27428813

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 755 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JAMES H ARNOLD

Mailing Address 419 GREEN HILL LN

City

BERWYN

State

PA

Zip Code

19312-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27428857

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

JODY CAFFERATA

Mailing Address 141 WHITETAIL DR

City

SALMON

State

ID

Zip Code

83467-5274

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27428876

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)

MR RUBEN D GROBAR

Mailing Address 9465 US HIGHWAY 181 N

City

FLORESVILLE

State

TX

Zip Code

78114-6404

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASTERS ELECTRIC

Occupation

ELECTRICIAN ASST.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27428886

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 756 / 1300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JACK SCHMIDT

Mailing Address 45 BROOKSIDE RD

City

HOPEWELL JCT

State

NY

Zip Code

12533-6629

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27428895

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

KELLY HOLSTON

Mailing Address 395 GOBBLER HEAD RD

City

POPLARVILLE

State

MS

Zip Code

39470-9215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27428979

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR RALPH W WILL

Mailing Address 3327 CARDIGAN CT

City

W LAFAYETTE

State

IN

Zip Code

47906-8722

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27428980

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 757 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR JACOB STOLTZFUS

Mailing Address RR 1 BOX 983

City State Zip Code
BLAIN PA 17006-9419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27428994

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)
MR JAMES M RITCHIE

Mailing Address 1496 LAUREL HOLLOW RD

City State Zip Code
SYOSSET NY 11791-9634

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27429000

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)
MR RAYMOND H GLOVER

Mailing Address 4859 LOWER SMITH RIVER RD

City State Zip Code
REEDSPORT OR 97467-9707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27429128

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 758 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ILDEFONSO GOMEZ

Mailing Address 21610 GUADALAJARA AVE

City

BOCA RATON

State

FL

Zip Code

33433-7503

FEC ID number of contributing
federal political committee.

C

Name of Employer

CONTINUICARE MEDICAL GROUP

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27429156

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DAVID PEACHEY

Mailing Address 83 CABIN LN

City

MILLMONT

State

PA

Zip Code

17845-8906

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

Transaction ID: 27429252

Amount of Each Receipt this Period

85.00

C.

Full Name (Last, First, Middle Initial)

MR BILLY W TUCKER

Mailing Address 1405 S MESA AVE

City

MONTROSE

State

CO

Zip Code

81401-5020

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: 27429280

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 759 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD D LAROCHE

Mailing Address 5830 W GORDONVILLE RD

City

SHEPHERD

State

MI

Zip Code

48883-9217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27429298

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR MICHAEL E WHITE

Mailing Address 5601 NE 67TH CIR

City

VANCOUVER

State

WA

Zip Code

98661-1852

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27429369

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID S GIBSON, SR

Mailing Address 1415 CHAPMAN DR

City

NEWBERRY

State

SC

Zip Code

29108-4126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27429447

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 760 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DARWIN D SMITH

Mailing Address 5308 COUNTY ROAD 7350

City

LUBBOCK

State

TX

Zip Code

79424-5743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27429476

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR CHRIS SCHNEIDER

Mailing Address 252 S 186TH ST

City

BURIEN

State

WA

Zip Code

98148-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27429505

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

MR HARRY J HENSLEY

Mailing Address 3769 HERMES DR

City

CINCINNATI

State

OH

Zip Code

45247-5021

FEC ID number of contributing
federal political committee.

C

Name of Employer
B & J BAKING CO.

Occupation

DELIVERY DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27429535

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 761 / 1300

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

IHOR I KURNIAWKA

Mailing Address PO BOX 180

City

BANGOR

State

PA

Zip Code

18013-0180

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Transaction ID: 27429545

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR EBBE NILSSON

Mailing Address 3524 44TH AVE S

City

MINNEAPOLIS

State

MN

Zip Code

55406-2904

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

Transaction ID: 27429549

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR FRANK W CLOVER

Mailing Address 6710 VICTORIAN CT

City

GRANBURY

State

TX

Zip Code

76049-2030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Transaction ID: 27429572

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 762 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIE DAVIS

Mailing Address PO BOX 822

City

RIVERTON

State

WY

Zip Code

82501-0116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27429611

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DARWIN W GOUGH

Mailing Address RR 2 BOX 145A

City

KEYSER

State

WV

Zip Code

26726-9232

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27429634

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DARWIN W GOUGH

Mailing Address RR 2 BOX 145A

City

KEYSER

State

WV

Zip Code

26726-9232

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27429635

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 763 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

PAUL BERGMAN

Mailing Address 12282 MAPLE CREST DR

City

BURLINGTON

State

WA

Zip Code

98233-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27429676

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

PAUL BERGMAN

Mailing Address 12282 MAPLE CREST DR

City

BURLINGTON

State

WA

Zip Code

98233-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Transaction ID: 27429678

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR MIKE JONES

Mailing Address 15417 E PALISADES BLVD

City

FOUNTAIN HILLS

State

AZ

Zip Code

85268-3525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27429704

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 764 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR FRANK M DORES

Mailing Address 2125 BEN FRANKLIN CT

City

ATWATER

State

CA

Zip Code

95301-5201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27429713

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR KENNETH STIVER

Mailing Address 140193 10TH ST

City

MITCHELL

State

NE

Zip Code

69357-5523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27429785

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR MIKE KOCHERT

Mailing Address PO BOX 2

City

LINDSAY

State

OK

Zip Code

73052-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27429797

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 765 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MARK PFEIFER

Mailing Address 208 DEVONPORT RD

City

WEDDINGTON

State

NC

Zip Code

28104-7805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27429799

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR DARRELL JACKSON

Mailing Address 640 BAGNELL DR

City

SAINT LOUIS

State

MO

Zip Code

63137-3359

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27429803

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MARCIA C DEAN

Mailing Address PO BOX 308

City

PIEDMONT

State

MO

Zip Code

63957-0308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27429805

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 766 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL A DONNER

Mailing Address 4412 CONDESA CT NW

City

ALBUQUERQUE

State

NM

Zip Code

87114-5097

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27429842

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MR JOHN G HOHMAN, JR

Mailing Address 1128 N 15TH ST

City

FERNANDINA BEACH

State

FL

Zip Code

32034-3135

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

848.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27429884

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

DANA WILDAY

Mailing Address 10879 STICKLE RD

City

FREEDOM

State

NY

Zip Code

14065-9533

FEC ID number of contributing
federal political committee.

C

Name of Employer
SARGENT TRANSPORTATION

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27429906

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 767 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT SCHONFELDER

Mailing Address PO BOX 255

City

STEPHENTOWN

State

NY

Zip Code

12168-0255

FEC ID number of contributing
federal political committee.

C

Name of Employer
CTL TRUCKING INC.

Occupation
DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27429917

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

AUDIE MESKIMEN

Mailing Address PO BOX 189

City

PONDEROSA

State

NM

Zip Code

87044-0189

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27430057

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR FRANK P JAMES

Mailing Address 1721 E BELT LINE RD APT 1416

City

COPPELL

State

TX

Zip Code

75019-9619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27430092

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 768 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR CHARLES BRADSHAW

Mailing Address 844 MILLER CREEK LN

City

NEWPORT NEWS

State

VA

Zip Code

23602-9467

FEC ID number of contributing
federal political committee.

C

Name of Employer
BLACKWATER USA

Occupation

INDEPENDENT CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27430124

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MS SANDRA G BARKER

Mailing Address 115 QUIET LN

City

HAZEL GREEN

State

AL

Zip Code

35750-7623

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27430234

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS HARRIET SMITH

Mailing Address 7690 FREDRICKSON RD

City

SEDRO WOOLLEY

State

WA

Zip Code

98284-8955

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27430243

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 769 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR VINCENT STANKIEWICZ

Mailing Address 633 MALVERN RD

City

ARDMORE

State

PA

Zip Code

19003-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27430246

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR STEPHEN B MCDOUGLE

Mailing Address 2721 BERNARD ST APT 40

City

BAKERSFIELD

State

CA

Zip Code

93306-2941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: 27430393

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR STEPHEN B MCDOUGLE

Mailing Address 2721 BERNARD ST APT 40

City

BAKERSFIELD

State

CA

Zip Code

93306-2941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27430394

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 770 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LEONARD N SPARKS

Mailing Address 212 W PRATT DR

City

MIDWEST CITY

State

OK

Zip Code

73110-4520

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27430477

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR L L WEBER, III

Mailing Address 3080 NE 49TH ST

City

FORT LAUDERDALE

State

FL

Zip Code

33308-4915

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27430531

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT B RAYBON

Mailing Address 63 WESLEY CIR

City

TOCCOA

State

GA

Zip Code

30577-8625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27430558

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 771 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JIMMY W PARKER

Mailing Address 122 HILLWOOD DR

City

NEW MARKET

State

AL

Zip Code

35761-9227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27430663

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR ROY PARHAM

Mailing Address 317 SHELBY ST LOT 13

City

WARREN

State

AR

Zip Code

71671-3764

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27430753

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ARTHUR R DEPEW

Mailing Address 16219 12TH AVE

City

WHITESTONE

State

NY

Zip Code

11357-2121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27430871

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

580.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 772 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RONALD FRANCIS

Mailing Address 974 161ST ST

City

PIPESTONE

State

MN

Zip Code

56164-3261

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: 27430882

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR HENRY L KING

Mailing Address PO BOX 3658

City

CINCINNATI

State

OH

Zip Code

45201-3658

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: 27430947

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

MR HENRY L KING

Mailing Address PO BOX 3658

City

CINCINNATI

State

OH

Zip Code

45201-3658

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Transaction ID: 27430951

Amount of Each Receipt this Period

-1000.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 773 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MRS ELIZABETH MURREY

Mailing Address 5895 GARDEN RIVER CV

City

MEMPHIS

State

TN

Zip Code

38120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 27430962

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR RANDY GILLETTE

Mailing Address 745C N 750 W

City

PAUL

State

ID

Zip Code

83347-8611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27431012

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR RANDY GILLETTE

Mailing Address 745C N 750 W

City

PAUL

State

ID

Zip Code

83347-8611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 8

Transaction ID: 27431014

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 774 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM T BALL

Mailing Address 1015 HIGH POINT DR

City

NICHOLASVILLE

State

KY

Zip Code

40356-8306

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27431181

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

GEORGE DANIELS

Mailing Address PO BOX 590007

City

ORLANDO

State

FL

Zip Code

32859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27431421

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

JEFFREY L WARDLEY

Mailing Address 110 BALES DR

City

WALNUT CREEK

State

CA

Zip Code

94596

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: 27431423

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 775 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ALAN ASH

Mailing Address 1463 GRUBBS ST

City

ATMORE

State

AL

Zip Code

36502-8201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27431589

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

WAYNE LA PIERRE

Mailing Address 11250 WAPLES MILL RD

City

FAIRFAX

State

VA

Zip Code

22030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: 27431780

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

MR BILL ROBERTS

Mailing Address 3322 BINGHAM PL

City

FAIRFIELD

State

CA

Zip Code

94534-4339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: 27431956

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

5525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 776 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

E. MORRELL

Mailing Address 5247 LEMON GULCH DR

City

CASTLE ROCK

State

CO

Zip Code

80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27432059

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

MR PAUL J WAGNER

Mailing Address 4405 NORTHSIDE PKWY NW APT 212

City

ATLANTA

State

GA

Zip Code

30327-5204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: 27432182

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MARTIN P BEICKERT

Mailing Address 72 MIDDLE ISLAND AVE

City

MEDFORD

State

NY

Zip Code

11763-2634

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: 27432206

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

975.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 777 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

CLAUDE NICHOLSON

Mailing Address 529 DAVIS ST E

City

ELBA

State

AL

Zip Code

36323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 9 / 2 0 0 8

Transaction ID: 27432330

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MS BOBBIE PACE

Mailing Address 380 GREEN ACRES FARM RD

City

WAVERLY

State

AL

Zip Code

36879-5043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: 27432375

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

J. R. ORTON

Mailing Address 10646 W MAIN RD

City

RIPLEY

State

NY

Zip Code

14775

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27432385

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 778 / 1300

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KEITH PEARSON

Mailing Address 22102 CAPE MAY LN

City

HUNTINGTON BEACH

State

CA

Zip Code

92646-8415

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 27453250

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B
Totaling \$2500.00 This changes the YTD Total to \$2-500.00

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

301980.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 779 / 1300

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 10501 Main Street

City

Fairfax

State

VA

Zip Code

22030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

80327.22

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 0 8

Transaction ID: 27452745

Amount of Each Receipt this Period

3207.44

Interest Income

SUBTOTAL of Receipts This Page (optional)

3207.44

TOTAL This Period (last page this line number only)

3207.44

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 780 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Edmonds Associates, Inc.	Transaction ID: 26165295 Date of Disbursement																				
Mailing Address 8221 Old Courthouse Road, Suite 2	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	0	8												
City Vienna State VA Zip Code 22182	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Newspaper Polybag Ads Candidate Name Mitch Daniels	<table border="1"> <tr> <td colspan="10">18116.00</td> </tr> </table>	18116.00																			
18116.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Independent Expenditure - Newspaper Polybag Ads																				
B. Full Name (Last, First, Middle Initial) Edmonds Associates, Inc.	Transaction ID: 26943066 Date of Disbursement																				
Mailing Address 8221 Old Courthouse Road, Suite 2	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	7		2	0	0	8												
City Vienna State VA Zip Code 22182	Amount of Each Disbursement this Period																				
Purpose of Disbursement Radio Ads Candidate Name Don Curtis	<table border="1"> <tr> <td colspan="10">14374.10</td> </tr> </table>	14374.10																			
14374.10																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Radio Ads																				
C. Full Name (Last, First, Middle Initial) Novacon Promotional Products	Transaction ID: 26944822 Date of Disbursement																				
Mailing Address 11100 Pulaski Highway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	7		2	0	0	8												
City White Marsh State MD Zip Code 21162	Amount of Each Disbursement this Period																				
Purpose of Disbursement Member Bumpersticker Candidate Name	<table border="1"> <tr> <td colspan="10">48062.94</td> </tr> </table>	48062.94																			
48062.94																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	006 Category/ Type Member Bumpersticker																				

SUBTOTAL of Disbursements This Page (optional)

80553.04

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 781 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Edmonds Associates, Inc.	Transaction ID: 26948177 Date of Disbursement																				
Mailing Address 8221 Old Courthouse Road, Suite 2	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	0	8												
City Vienna State VA Zip Code 22182	Amount of Each Disbursement this Period																				
Purpose of Disbursement Radio Ads	<table border="1"> <tr> <td>4</td><td>8</td><td>9</td><td>7</td><td>0</td><td>0</td> </tr> </table>	4	8	9	7	0	0														
4	8	9	7	0	0																
Candidate Name Charles Van Zant	<table border="1"> <tr> <td>0</td><td>1</td> </tr> <tr> <td colspan="2">Category/ Type</td> </tr> </table>	0	1	Category/ Type																	
0	1																				
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 21	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Radio Ads																					
B. Full Name (Last, First, Middle Initial) Friends of Ryan McKenna	Transaction ID: 26957187 Date of Disbursement																				
Mailing Address 3 Briarwood Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	8												
City Crystal City State MO Zip Code 63019	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ryan McKenna, STATE SENATE 22nd MO	<table border="1"> <tr> <td>1</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td> </tr> </table>	1	0	0	0	0	0														
1	0	0	0	0	0																
Candidate Name MO Sen. Ryan McKenna	<table border="1"> <tr> <td>0</td><td>1</td> </tr> <tr> <td colspan="2">Category/ Type</td> </tr> </table>	0	1	Category/ Type																	
0	1																				
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Ryan McKenna, STATE SENATE 22nd MO																					
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975891 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage	<table border="1"> <tr> <td>3</td><td>9</td><td>9</td><td>7</td><td>0</td><td>0</td> </tr> </table>	3	9	9	7	0	0														
3	9	9	7	0	0																
Candidate Name John Bodnar	<table border="1"> <tr> <td>0</td><td>1</td> </tr> <tr> <td colspan="2">Category/ Type</td> </tr> </table>	0	1	Category/ Type																	
0	1																				
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 27	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Postage																					

SUBTOTAL of Disbursements This Page (optional)

6296.70

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 782 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975892 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage	<table border="1"> <tr> <td>234.88</td> </tr> </table>	234.88																			
234.88																					
Candidate Name Kevin Priola	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 30	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Postage																					
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975894 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage	<table border="1"> <tr> <td>6.16</td> </tr> </table>	6.16																			
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011																					
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Postage																					
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975895 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage	<table border="1"> <tr> <td>597.44</td> </tr> </table>	597.44																			
597.44																					
Candidate Name Matt Fries	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Postage																					
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>838.48</td> </tr> </table>	838.48																			
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TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 783 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975896 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage	<table border="1"> <tr> <td>633.46</td> </tr> </table>	633.46																			
633.46																					
Candidate Name Libby Szabo	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Postage	Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975897 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
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511.80																					
Candidate Name Robert John Hadfield	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Postage	Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975899 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postcards	<table border="1"> <tr> <td>330.15</td> </tr> </table>	330.15																			
330.15																					
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011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 27	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Postcards	Postcards																				

SUBTOTAL of Disbursements This Page (optional)

1475.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 784 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postcards

Candidate Name
Kevin Priola

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 30

Transaction ID: 26975900

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

228.30

Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postcards

Candidate Name
CO Rep. David Balmer

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 39

Transaction ID: 26975901

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

46.65

Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postcards

Candidate Name
Matt Fries

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District:

Transaction ID: 26975902

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

452.25

Postcards

SUBTOTAL of Disbursements This Page (optional)

727.20

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975903 Date of Disbursement																				
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M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postcards	<table border="1"> <tr> <td>4</td><td>7</td><td>1</td><td>.</td><td>8</td><td>0</td> </tr> </table>	4	7	1	.	8	0														
4	7	1	.	8	0																
Candidate Name Libby Szabo	<table border="1"> <tr> <td>0</td><td>1</td><td>1</td> </tr> <tr> <td>Category/</td><td>Type</td><td></td> </tr> </table>	0	1	1	Category/	Type															
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Category/	Type																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	Postcards																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975904 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postcards	<table border="1"> <tr> <td>3</td><td>9</td><td>2</td><td>.</td><td>7</td><td>5</td> </tr> </table>	3	9	2	.	7	5														
3	9	2	.	7	5																
Candidate Name Robert John Hadfield	<table border="1"> <tr> <td>0</td><td>1</td><td>1</td> </tr> <tr> <td>Category/</td><td>Type</td><td></td> </tr> </table>	0	1	1	Category/	Type															
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Category/	Type																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	Postcards																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975907 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
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1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage	<table border="1"> <tr> <td>1</td><td>1</td><td>2</td><td>.</td><td>9</td><td>4</td> </tr> </table>	1	1	2	.	9	4														
1	1	2	.	9	4																
Candidate Name WAYNE KRIEGER	<table border="1"> <tr> <td>0</td><td>1</td><td>1</td> </tr> <tr> <td>Category/</td><td>Type</td><td></td> </tr> </table>	0	1	1	Category/	Type															
0	1	1																			
Category/	Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	Postage																				

SUBTOTAL of Disbursements This Page (optional)

977.49

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975908 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage	<table border="1"> <tr> <td>53.09</td> </tr> </table>	53.09																			
53.09																					
Candidate Name Linda Flores	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 51	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975909 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage	<table border="1"> <tr> <td>61.26</td> </tr> </table>	61.26																			
61.26																					
Candidate Name OR Rep. Chuck Burley	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 54	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975914 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postcards	<table border="1"> <tr> <td>104.85</td> </tr> </table>	104.85																			
104.85																					
Candidate Name WAYNE KRIEGER	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	Postcards																				

SUBTOTAL of Disbursements This Page (optional)

219.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 787 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postcards

Candidate Name
Linda Flores

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: OR District: 51

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975915

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

49.28

Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postcards

Candidate Name
OR Rep. Chuck Burley

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: OR District: 54

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975916

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

56.87

Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postage

Candidate Name
Delegate Barbara Hatfield

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WV District: 30

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975941

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

34.25

Postage

SUBTOTAL of Disbursements This Page (optional)

140.40

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 788 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostageCandidate Name
Mark A. Hunt011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 30

Transaction ID: 26975942

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

34.25

Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostageCandidate Name
SHARON SPENCER011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 30

Transaction ID: 26975943

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

34.25

Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostageCandidate Name
D. Todd Carden011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 30

Transaction ID: 26975944

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

34.25

Postage

SUBTOTAL of Disbursements This Page (optional)

102.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 789 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postage

Candidate Name
John Miller, Jr.

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 30

Transaction ID: 26975945

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

34.25

Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postage

Candidate Name
Lance Vaughn

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 30

Transaction ID: 26975946

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

34.25

Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postage

Candidate Name
DAVID PERRY

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 29

Transaction ID: 26975947

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

11.68

Postage

SUBTOTAL of Disbursements This Page (optional)

80.18

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 790 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostageCandidate Name
Tom Louisos011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 29

Transaction ID: 26975948

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

11.68

Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostageCandidate Name
WV Del. Margaret Stagers011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 29

Transaction ID: 26975949

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

11.68

Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostageCandidate Name
Betsy Dungan011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 57

Transaction ID: 26975950

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

5.77

Postage

SUBTOTAL of Disbursements This Page (optional)

29.13

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 791 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostageCandidate Name
William Laird, IVOffice Sought: ☐ House
☒ Senate
☐ President

State: WV District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975951

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

43.55

Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostageCandidate Name
Joe Manchin, IIOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975952

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

95.25

Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostageCandidate Name
Darrell V. McGrawOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975953

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

95.25

Postage

SUBTOTAL of Disbursements This Page (optional)

234.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 792 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postage

Candidate Name
Beth Walker

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 26975955

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

95.25

Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postcards

Candidate Name
Delegate Barbara Hatfield

Office Sought: ☒ House
☐ Senate
☐ President

State: WV District: 30

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 26975960

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

16.83

Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postcards

Candidate Name
Mark A. Hunt

Office Sought: ☒ House
☐ Senate
☐ President

State: WV District: 30

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 26975961

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

16.83

Postcards

SUBTOTAL of Disbursements This Page (optional)

128.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 793 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postcards

Candidate Name
SHARON SPENCER

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WV District: 30

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975962

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

16.83

Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postcards

Candidate Name
D. Todd Carden

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WV District: 30

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975963

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

16.83

Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Postcards

Candidate Name
John Miller, Jr.

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WV District: 30

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975964

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

16.83

Postcards

SUBTOTAL of Disbursements This Page (optional)

50.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 794 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975965 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postcards	<table border="1"> <tr> <td>16.83</td> </tr> </table>	16.83																			
16.83																					
Candidate Name Lance Vaughn	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Postcards	Postcards																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975966 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postcards	<table border="1"> <tr> <td>13.17</td> </tr> </table>	13.17																			
13.17																					
Candidate Name DAVID PERRY	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 29	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Postcards	Postcards																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975967 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postcards	<table border="1"> <tr> <td>13.17</td> </tr> </table>	13.17																			
13.17																					
Candidate Name Tom Louisos	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 29	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Postcards	Postcards																				

SUBTOTAL of Disbursements This Page (optional)

43.17

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 795 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostcardsCandidate Name
WV Del. Margaret StaggersOffice Sought: ☒ House
☐ Senate
☐ President

State: WV District: 29

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975968

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Amount of Each Disbursement this Period

13.17

Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostcardsCandidate Name
Betsy DunganOffice Sought: ☒ House
☐ Senate
☐ President

State: WV District: 57

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975969

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Amount of Each Disbursement this Period

15.27

Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
PostcardsCandidate Name
William Laird, IVOffice Sought: ☐ House
☒ Senate
☐ President

State: WV District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26975970

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Amount of Each Disbursement this Period

39.58

Postcards

SUBTOTAL of Disbursements This Page (optional)

68.02

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 796 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975971 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postcards	<table border="1"> <tr> <td>95.42</td> </tr> </table>	95.42																			
95.42																					
Candidate Name Joe Manchin, II	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Postcards																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975972 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postcards	<table border="1"> <tr> <td>95.42</td> </tr> </table>	95.42																			
95.42																					
Candidate Name Darrell V. McGraw	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Postcards																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26975973 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
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1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postcards	<table border="1"> <tr> <td>95.42</td> </tr> </table>	95.42																			
95.42																					
Candidate Name Beth Walker	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Postcards																				

SUBTOTAL of Disbursements This Page (optional)

286.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 797 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
WI Rep. Jeffrey Mursau

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District: 36

Transaction ID: 26982485

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

280.93

Independent Expenditure -
Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
WI Rep. Mary Williams

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District: 87

Transaction ID: 26982486

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

222.29

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
WI Rep. Jeffrey Mursau

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District: 36

Transaction ID: 26982490

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

205.03

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

708.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 798 / 1300

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982491 Date of Disbursement
Mailing Address 8341 Beechcraft Avenue	<div> <div>10</div> <div>31</div> <div>2008</div> </div>
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
Purpose of Disbursement Independent Expenditure - Postcards	<div>162.23</div>
Candidate Name WI Rep. Mary Williams	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 87	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982496 Date of Disbursement
Mailing Address 8341 Beechcraft Avenue	<div> <div>10</div> <div>31</div> <div>2008</div> </div>
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
Purpose of Disbursement Independent Expenditure - Postage	<div>69.91</div>
Candidate Name Jane English	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 42	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982497 Date of Disbursement
Mailing Address 8341 Beechcraft Avenue	<div> <div>10</div> <div>31</div> <div>2008</div> </div>
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
Purpose of Disbursement Independent Expenditure - Postage	<div>47.58</div>
Candidate Name Andrea Lea	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 68	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)

279.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 799 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982499 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>67.54</td> </tr> </table>	67.54																			
67.54																					
Candidate Name Mark Martin	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 87	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982500 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
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1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>91.59</td> </tr> </table>	91.59																			
91.59																					
Candidate Name AR Rep. Jim House	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 89	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982504 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>63.94</td> </tr> </table>	63.94																			
63.94																					
Candidate Name Jane English	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 42	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				

SUBTOTAL of Disbursements This Page (optional)

223.07

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 800 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982505 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>43.51</td> </tr> </table>	43.51																			
43.51																					
Candidate Name Andrea Lea	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 68	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982506 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
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1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>61.77</td> </tr> </table>	61.77																			
61.77																					
Candidate Name Mark Martin	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 87	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982508 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>83.78</td> </tr> </table>	83.78																			
83.78																					
Candidate Name AR Rep. Jim House	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 89	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				

SUBTOTAL of Disbursements This Page (optional)

189.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Al Novstrup

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: SD District:

Transaction ID: 26982512

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

82.89

Independent Expenditure -
Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
AL KOISTINEN

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: SD District:

Transaction ID: 26982513

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

82.62

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Russell Olson

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: SD District:

Transaction ID: 26982514

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

65.34

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

230.85

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982515 Date of Disbursement
Mailing Address 8341 Beechcraft Avenue	<div> <div>10</div> <div>31</div> <div>2008</div> </div>
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
Purpose of Disbursement Independent Expenditure - Postage	<div>62.10</div>
Candidate Name SD Rep. Phyllis Heineman	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 13	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982516 Date of Disbursement
Mailing Address 8341 Beechcraft Avenue	<div> <div>10</div> <div>31</div> <div>2008</div> </div>
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
Purpose of Disbursement Independent Expenditure - Postage	<div>51.03</div>
Candidate Name Jerad Higman	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982518 Date of Disbursement
Mailing Address 8341 Beechcraft Avenue	<div> <div>10</div> <div>31</div> <div>2008</div> </div>
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
Purpose of Disbursement Independent Expenditure - Postcards	<div>92.35</div>
Candidate Name Al Novstrup	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

205.48

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 803 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982519 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>92.05</td> </tr> </table>	92.05																			
92.05																					
Candidate Name AL KOISTINEN	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982520 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>72.80</td> </tr> </table>	72.80																			
72.80																					
Candidate Name Russell Olson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982521 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
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1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>69.18</td> </tr> </table>	69.18																			
69.18																					
Candidate Name SD Rep. Phyllis Heineman	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 13	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

234.03

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 804 / 1300

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Jerad Higman

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: SD District:

Transaction ID: 26982522

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

56.85

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Andrew Lutz

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: ND District:

Transaction ID: 26982524

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

75.19

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Governor John Hoeven

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: 26982525

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

75.18

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

207.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 805 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982527 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>70.42</td> </tr> </table>	70.42																			
70.42																					
Candidate Name Andrew Lutz	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postcards																					
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982528 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>70.41</td> </tr> </table>	70.41																			
70.41																					
Candidate Name Governor John Hoeven	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postcards																					
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982530 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>39.69</td> </tr> </table>	39.69																			
39.69																					
Candidate Name NM Sen. Clinton Harden	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postage																					

SUBTOTAL of Disbursements This Page (optional)

180.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 806 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982531 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>47.92</td> </tr> </table>	47.92																			
47.92																					
Candidate Name STEVE KOMADINA	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982532 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>36.18</td> </tr> </table>	36.18																			
36.18																					
Candidate Name NM Sen. Helen Diane Snyder	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26982533 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>47.39</td> </tr> </table>	47.39																			
47.39																					
Candidate Name Senator Leonard Rawson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

131.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 807 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
NM Sen. Clinton Harden

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: NM District:

Transaction ID: 26982538

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

39.27

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
STEVE KOMADINA

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: NM District:

Transaction ID: 26982539

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

47.41

Independent Expenditure -
Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
NM Sen. Helen Diane Snyder

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: NM District:

Transaction ID: 26982540

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

35.79

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

122.47

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 808 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Senator Leonard Rawson

011
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2008
<input checked="" type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼

State: NM District:

Transaction ID: 26982541

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

46.88

Independent Expenditure -
Postcards**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Corrine Wiesmueller

011
Category/ Type

Office Sought:	Disbursement For:
<input checked="" type="checkbox"/> House	2008
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼

State: WI District: 07

Transaction ID: 26991046

Date of Disbursement

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1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

193.16

Independent Expenditure -
Postage**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Alex Pieper

011
Category/ Type

Office Sought:	Disbursement For:
<input checked="" type="checkbox"/> House	2008
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼

State: WI District: 26

Transaction ID: 26991073

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

197.86

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

437.90

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 809 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Debi Towns011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 43

Transaction ID: 26991142

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

394.81

Independent Expenditure -
Postage**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Keith Ripp011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 47

Transaction ID: 26991171

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

345.27

Independent Expenditure -
Postage**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Travis Tranel011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 49

Transaction ID: 26991196

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

458.43

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional) ▶

1198.51

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 810 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26991219 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>296.53</td> </tr> </table>	296.53																			
296.53																					
Candidate Name Mark Reiff	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 54	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26991248 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>239.60</td> </tr> </table>	239.60																			
239.60																					
Candidate Name Jo Egelhoff	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 57	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26991318 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>183.17</td> </tr> </table>	183.17																			
183.17																					
Candidate Name Alex Tiahnybok	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 65	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				

SUBTOTAL of Disbursements This Page (optional)

719.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 811 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26991351 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>534.54</td> </tr> </table>	534.54																			
534.54																					
Candidate Name WI Rep. Terry Moulton	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 68	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26991381 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>493.89</td> </tr> </table>	493.89																			
493.89																					
Candidate Name Shirl LaBarre	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 74	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26991416 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>291.14</td> </tr> </table>	291.14																			
291.14																					
Candidate Name WI Rep. Brett Davis	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 80	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				

SUBTOTAL of Disbursements This Page (optional)

1319.57

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 812 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26991438 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>224.62</td> </tr> </table>	224.62																			
224.62																					
Candidate Name Tony Theisen	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 88	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26991585 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>398.41</td> </tr> </table>	398.41																			
398.41																					
Candidate Name Dan Hellman	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 92	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26991615 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
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1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>286.55</td> </tr> </table>	286.55																			
286.55																					
Candidate Name Darcy Fields	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 93	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				

SUBTOTAL of Disbursements This Page (optional)

909.58

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 813 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
WI Rep. Lee Nerison

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District: 96

Transaction ID: 26991645

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

369.24

Independent Expenditure -
Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Senator Alberta Darling

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District:

Transaction ID: 26991688

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

311.12

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Tom Tiffany

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District:

Transaction ID: 26991750

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

1182.24

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

1862.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 814 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Randy Hopper

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District:

Transaction ID: 26991783

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

966.51

Independent Expenditure -
Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Dan Kapanke

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District:

Transaction ID: 26991810

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

876.32

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Corrine Wiesmueller

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District: 07

Transaction ID: 26992496

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

111.58

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

1954.41

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 815 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26992519 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>114.30</td> </tr> </table>	114.30																			
114.30																					
Candidate Name Alex Pieper	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 26	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26994050 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>228.07</td> </tr> </table>	228.07																			
228.07																					
Candidate Name Debi Towns	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 43	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26994084 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>199.46</td> </tr> </table>	199.46																			
199.46																					
Candidate Name Keith Ripp	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 47	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

541.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 816 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Travis Tranel

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 49

Transaction ID: 26994126

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

264.82

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Mark Reiff

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 54

Transaction ID: 26994150

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

171.30

Independent Expenditure -
Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Jo Egelhoff

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 57

Transaction ID: 26994180

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

138.41

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

574.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 817 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26994206 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>105.81</td> </tr> </table>	105.81																			
105.81																					
Candidate Name Alex Tiahnybok	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 65	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26994237 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>308.79</td> </tr> </table>	308.79																			
308.79																					
Candidate Name WI Rep. Terry Moulton	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 68	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 26994269 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>285.31</td> </tr> </table>	285.31																			
285.31																					
Candidate Name Shirl LaBarre	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 74	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				

SUBTOTAL of Disbursements This Page (optional)

699.91

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 818 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
WI Rep. Brett DavisOffice Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District: 80

Transaction ID: 26994294

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

168.18

Independent Expenditure -
Postcards**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Tony TheisenOffice Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District: 88

Transaction ID: 26994321

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

129.76

Independent Expenditure -
Postcards**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Dan HellmanOffice Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: WI District: 92

Transaction ID: 26994348

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

230.15

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

528.09

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Darcy Fields

011
Category/ Type

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 93

Transaction ID: 26994378

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

165.53

Independent Expenditure -
Postcards**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
WI Rep. Lee Nerison

011
Category/ Type

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 96

Transaction ID: 26994415

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

213.30

Independent Expenditure -
Postcards**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Senator Alberta Darling

011
Category/ Type

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District:

Transaction ID: 26994437

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

179.72

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

558.55

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 820 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Tom Tiffany

011
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: WI District:

Transaction ID: 26994461

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

682.95

Independent Expenditure -
Postcards**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Randy Hopper

011
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: WI District:

Transaction ID: 26994483

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

558.32

Independent Expenditure -
Postcards**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Dan Kapanke

011
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: WI District:

Transaction ID: 26994550

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

506.23

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

1747.50

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
Coleman for Senate Recount Fund

Mailing Address 680 Transfer Road Suite A

City St Paul State MN Zip Code 55114

Purpose of Disbursement
Recount2008 Recount FundCandidate Name
Norm Coleman011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: MN District:

Transaction ID: 27119890

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	8

Amount of Each Disbursement this Period

4950.00

Recount Fund

B. Full Name (Last, First, Middle Initial)
Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Stephen M. Sweeney011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 27123234

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	8

Amount of Each Disbursement this Period

506.43

Independent Expenditure -
Postage**C.** Full Name (Last, First, Middle Initial)
Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Stephen M. Sweeney011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 27123236

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	8

Amount of Each Disbursement this Period

364.04

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

5820.47

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 822 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Hulshof for Governor

Mailing Address 12977 N. Outer Forty Drive, Suite

City State Zip Code
Creve Couer MO 63141

Purpose of Disbursement
Void - Hulshof for Governor

Candidate Name
Kenny Hulshof

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: 27149571

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

-500.00

Void - Hulshof for Govern-
or

B.

Full Name (Last, First, Middle Initial)

John Wight Campaign Fund

Mailing Address 2122 SW 18th Avenue

City State Zip Code
Portland OR 97201

Purpose of Disbursement
Void - John Wight Campaign Fund

Candidate Name
John Wight

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: OR District:

Transaction ID: 27149573

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

-500.00

Void - John Wight Campaign
Fund

C.

Full Name (Last, First, Middle Initial)

Stivers For Congress

Mailing Address 81 S Fifth Street

City State Zip Code
Columbus OH 43215

Purpose of Disbursement
Recount2008 Recount Fund

Candidate Name
Mr. Steve Stivers

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 27155771

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

2500.00

Recount Fund

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 823 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
Citizens to Elect Jim Butterworth

Mailing Address 1400 Ginger Trail

City State Zip Code
Demorest GA 30535Purpose of Disbursement
Debt RetirementCandidate Name
Jim ButterworthOffice Sought: ☐ House
☒ Senate
☐ President

State: GA District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼
General Debt 2008

Transaction ID: 27155772

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	1	/	2	0	0	8

Amount of Each Disbursement this Period

250.00

Debt Retirement

B. Full Name (Last, First, Middle Initial)
Crosby for Senate

Mailing Address P.O. Box 1707

City State Zip Code
Tifton GA 31793Purpose of Disbursement
Debt RetirementCandidate Name
John Dickey CrosbyOffice Sought: ☐ House
☒ Senate
☐ President

State: GA District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼
General Debt 2008

Transaction ID: 27156072

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	1	/	2	0	0	8

Amount of Each Disbursement this Period

250.00

Debt Retirement

C. Full Name (Last, First, Middle Initial)
Friends of Jan Jones

Mailing Address 13765 Brittle Road

City State Zip Code
Alpharetta GA 30004Purpose of Disbursement
Debt RetirementCandidate Name
GA Rep. Jan JonesOffice Sought: ☒ House
☐ Senate
☐ President

State: GA District: 46

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼
General Debt 2008

Transaction ID: 27156446

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	1	/	2	0	0	8

Amount of Each Disbursement this Period

250.00

Debt Retirement

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Friends of Tommie Williams

Mailing Address 148 Williams Avenue

City Lyons State GA Zip Code 30346

Purpose of Disbursement
Debt Retirement

Candidate Name
Senator Tommie Williams

Office Sought: ☐ House ☒ Senate ☐ President
State: GA District: Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼
General Debt 2008

Transaction ID: 27156447

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

250.00

Debt Retirement

B.

Full Name (Last, First, Middle Initial)

John Tuttle for Leadership

Mailing Address 176 Cottage Street

City Sanford State ME Zip Code 04073

Purpose of Disbursement
Debt Retirement

Candidate Name
ME Rep. John Tuttle, Jr.

Office Sought: ☒ House ☐ Senate ☐ President
State: ME District: 43 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼
General Debt 2008

Transaction ID: 27156453

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

250.00

Debt Retirement

C.

Full Name (Last, First, Middle Initial)

Committee to Elect Tim Eichenberg

Mailing Address 7800 Charger Trail, NE

City Albuquerque State NM Zip Code 87109

Purpose of Disbursement
Debt Retirement

Candidate Name
Tim Eichenberg

Office Sought: ☐ House ☒ Senate ☐ President
State: NM District: Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼
General Debt 2008

Transaction ID: 27156489

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

250.00

Debt Retirement

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 825 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Todd Hunter Campaign	Transaction ID: 27156555 Date of Disbursement																				
Mailing Address 14617 S. Padre Island Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	1		2	0	0	8												
City Corpus Christi State TX Zip Code 78418	Amount of Each Disbursement this Period																				
Purpose of Disbursement Debt Retirement	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name Todd Hunter	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 32	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ General Debt 2008																				
	Debt Retirement																				
B. Full Name (Last, First, Middle Initial) Tim Kleinschmidt Campaign	Transaction ID: 27156558 Date of Disbursement																				
Mailing Address P.O. Box 868	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	1		2	0	0	8												
City Lexington State TX Zip Code 78947	Amount of Each Disbursement this Period																				
Purpose of Disbursement Debt Retirement	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name Tim Kleinschmidt	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ General Debt 2008																				
	Debt Retirement																				
C. Full Name (Last, First, Middle Initial) Ralph Sheffield for State Representative	Transaction ID: 27156630 Date of Disbursement																				
Mailing Address 4509 Elf Trail	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	1		2	0	0	8												
City Belton State TX Zip Code 76513	Amount of Each Disbursement this Period																				
Purpose of Disbursement Debt Retirement	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name Ralph Sheffield	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 55	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ General Debt 2008																				
	Debt Retirement																				

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 826 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Kristi Thibaut Campaign

Mailing Address 13316 Westheimer Road, Suite 100

City State Zip Code
Houston TX 77077

Purpose of Disbursement
Debt Retirement

Candidate Name
Kristi Thibaut

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: TX District: 33

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼
General Debt 2008

Transaction ID: 27156632

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

250.00

Debt Retirement

B.

Full Name (Last, First, Middle Initial)

Randy Weber for Texas House

Mailing Address 2810 Westminster Street

City State Zip Code
Pearland TX 77581

Purpose of Disbursement
Debt Retirement

Candidate Name
Randy Weber

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: TX District: 29

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼
General Debt 2008

Transaction ID: 27156633

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

250.00

Debt Retirement

C.

Full Name (Last, First, Middle Initial)

Tennessee Republican Caucus

Mailing Address P.O. Box 190539

City State Zip Code
Nashville TN 37219-0539

Purpose of Disbursement

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 27156634

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 827 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Victory PAC

Mailing Address P.O. Box 2742

City
Jackson

State
MS

Zip Code
39207

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 27157068

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

250.00

011
Category/
Type

B.

Full Name (Last, First, Middle Initial)

Joan Huffman Campaign

Mailing Address 6129 C Edloe Street

City
Houston

State
TX

Zip Code
77005

Purpose of Disbursement

Joan Huffman, STATE SENATE 17th TX

Candidate Name

Joan Huffman

Office Sought: ☐ House
☒ Senate
☐ President

State: TX District:

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) ▼

Special-General2008

Transaction ID: 27157071

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

250.00

011
Category/
Type

Joan Huffman, STATE SENATE
17th TX

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City
Gaithersburg

State
MD

Zip Code
20879-1509

Purpose of Disbursement

Independent Expenditure - Postage

Candidate Name

Representa David Levdansky

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 39

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27266411

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

76.28

011
Category/
Type

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

576.28

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Bill DeWeese011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2007
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 50

Transaction ID: 27266412

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

72.20

Independent Expenditure -
Postage**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Ed Vogel011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2007
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District:

Transaction ID: 27266413

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

270.28

Independent Expenditure -
Postage**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Tom Corbett011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2007
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 27266414

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

139.59

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional) ►

482.07

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Representa David Levdansky

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2007 ☐ Primary ☒ General ☐ Other (specify) ▼

State: PA District: 39

Transaction ID: 27266419

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

57.19

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Bill DeWeese

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2007 ☐ Primary ☒ General ☐ Other (specify) ▼

State: PA District: 50

Transaction ID: 27266420

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

54.14

Independent Expenditure -
Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Ed Vogel

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2007 ☐ Primary ☒ General ☐ Other (specify) ▼

State: PA District:

Transaction ID: 27266421

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

202.66

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

313.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27266422																				
Mailing Address	Date of Disbursement																				
8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg	Amount of Each Disbursement this Period																				
State MD	104.66																				
Zip Code 20879-1509																					
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Candidate Name Tom Corbett	Independent Expenditure - Postcards																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	Transaction ID: 27266426																				
B. Full Name (Last, First, Middle Initial) Novacon Promotional Products	Date of Disbursement																				
Mailing Address 11100 Pulaski Highway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City White Marsh	Amount of Each Disbursement this Period																				
State MD	276.69																				
Zip Code 21162																					
Purpose of Disbursement Independent Expenditure - Bumper Stickers	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Candidate Name Monica Douglas	Independent Expenditure - Bumper Stickers																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: PA District: 39	C. Full Name (Last, First, Middle Initial) Prolist Inc.																				
Mailing Address 8341 Beechcraft Avenue	Transaction ID: 27275425																				
City Gaithersburg	Date of Disbursement																				
State MD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	92.32																				
Candidate Name Ann Clemmer	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: AR District: 29	Independent Expenditure - Postage																				

SUBTOTAL of Disbursements This Page (optional)

473.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 831 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Bill Fechtolkotter

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District: 45

Transaction ID: 27275426

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

38.57

Independent Expenditure -
Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Jonathan Dismang

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District: 49

Transaction ID: 27275427

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

88.03

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Stephanie Malone

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District: 64

Transaction ID: 27275430

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

35.94

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

162.54

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 832 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27275431 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 8
	Mailing Address 8341 Beechcraft Avenue	
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 67.70
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name John Van Gorder	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: AR District: 67	Independent Expenditure - Postage
B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277049 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 8
	Mailing Address 8341 Beechcraft Avenue	
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 85.52
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Ann Clemmer	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: AR District: 29	Independent Expenditure - Postcards
C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277050 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 8
	Mailing Address 8341 Beechcraft Avenue	
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 35.74
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Bill Fechtolkotter	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: AR District: 45	Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)

188.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 833 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277051 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>81.55</td> </tr> </table>	81.55																			
81.55																					
Candidate Name Jonathan Dismang	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 49	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277052 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>33.29</td> </tr> </table>	33.29																			
33.29																					
Candidate Name Stephanie Malone	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 64	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277111 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>62.72</td> </tr> </table>	62.72																			
62.72																					
Candidate Name John Van Gorder	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 67	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

177.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277644 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>39.45</td> </tr> </table>	39.45																			
39.45																					
Candidate Name SC Rep. Wallace Scarborough	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 15	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277645 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>42.92</td> </tr> </table>	42.92																			
42.92																					
Candidate Name SC Rep. Shannon Erickson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 24	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277646 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>44.55</td> </tr> </table>	44.55																			
44.55																					
Candidate Name Mark Willis	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 16	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				

SUBTOTAL of Disbursements This Page (optional)

126.92

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277647 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>72.37</td> </tr> </table>	72.37																			
72.37																					
Candidate Name Joey Millwood	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 38	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277648 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>53.57</td> </tr> </table>	53.57																			
53.57																					
Candidate Name SC Rep. Phillip Lowe	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 60	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277649 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>62.48</td> </tr> </table>	62.48																			
62.48																					
Candidate Name David Herndon	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 79	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				

SUBTOTAL of Disbursements This Page (optional)

188.42

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 836 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277650 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>142.56</td> </tr> </table>	142.56																			
142.56																					
Candidate Name Dee Compton	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277651 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>103.77</td> </tr> </table>	103.77																			
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C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277652 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>157.56</td> </tr> </table>	157.56																			
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Candidate Name J. Mick Mulvaney	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
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SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>403.89</td> </tr> </table>	403.89																			
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TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277653 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	8	
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>150.28</td> </tr> </table>	150.28																			
150.28																					
Candidate Name SC Sen. A. Shane Massey	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
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Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277656 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	8	
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>33.35</td> </tr> </table>	33.35																			
33.35																					
Candidate Name SC Rep. Wallace Scarborough	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 15	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277657 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	8	
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1	1		2	4		2	0	8													
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>36.30</td> </tr> </table>	36.30																			
36.30																					
Candidate Name SC Rep. Shannon Erickson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 24	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

219.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Mark Willis

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 16

Transaction ID: 27277658

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

37.67

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Joey Millwood

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 38

Transaction ID: 27277659

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

61.20

Independent Expenditure -
Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
SC Rep. Phillip Lowe

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 60

Transaction ID: 27277660

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

45.30

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

144.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277661 Date of Disbursement																				
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1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
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52.84																					
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011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 79	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277662 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
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Candidate Name Dee Compton	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
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Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277663 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
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SUBTOTAL of Disbursements This Page (optional)

261.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 840 / 1300

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277664 Date of Disbursement																				
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>133.24</td> </tr> </table>	133.24																			
133.24																					
Candidate Name J. Mick Mulvaney	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
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Category/ Type																					
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Independent Expenditure - Postcards																					
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277665 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>127.08</td> </tr> </table>	127.08																			
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Candidate Name SC Sen. A. Shane Massey	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
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Category/ Type																					
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Independent Expenditure - Postcards																					
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277674 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>145.24</td> </tr> </table>	145.24																			
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Candidate Name Timothy D Moffitt	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
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Category/ Type																					
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Independent Expenditure - Postcards																					

SUBTOTAL of Disbursements This Page (optional)

405.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 841 / 1300

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
NC Rep. Patricia McElraft

Office Sought: ☒ House
☐ Senate
☐ President

State: NC District: 13

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27277675

Date of Disbursement

/ /

Amount of Each Disbursement this Period

252.47

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
NC Rep. Nelson Dollar

Office Sought: ☒ House
☐ Senate
☐ President

State: NC District: 36

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27277676

Date of Disbursement

/ /

Amount of Each Disbursement this Period

131.54

Independent Expenditure -
Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
NC Rep. Marilyn Avila

Office Sought: ☒ House
☐ Senate
☐ President

State: NC District: 40

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27277677

Date of Disbursement

/ /

Amount of Each Disbursement this Period

198.95

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

582.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 842 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277678 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>148.78</td> </tr> </table>	148.78																			
148.78																					
Candidate Name NC Rep. David Lewis	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 53	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277683 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>171.87</td> </tr> </table>	171.87																			
171.87																					
Candidate Name Mark Hollo	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 88	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277684 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>350.95</td> </tr> </table>	350.95																			
350.95																					
Candidate Name NC Sen. Doug Berger	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

671.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 843 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277685 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>322.20</td> </tr> </table>	322.20																			
322.20																					
Candidate Name Richard Gunn	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277686 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>400.68</td> </tr> </table>	400.68																			
400.68																					
Candidate Name Debbie Ann Clary	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277707 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>226.71</td> </tr> </table>	226.71																			
226.71																					
Candidate Name Timothy D Moffitt	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 16	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

949.59

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 844 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
NC Rep. Patricia McElraftOffice Sought: ☒ House
☐ Senate
☐ President

State: NC District: 13

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27277708

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

394.09

Independent Expenditure -
Postage**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
NC Rep. Nelson DollarOffice Sought: ☒ House
☐ Senate
☐ President

State: NC District: 36

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27277710

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

205.33

Independent Expenditure -
Postage**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
NC Rep. Marilyn AvilaOffice Sought: ☒ House
☐ Senate
☐ President

State: NC District: 40

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27277711

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

310.55

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

909.97

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 845 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277712 Date of Disbursement																				
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M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>232.23</td> </tr> </table>	232.23																			
232.23																					
Candidate Name NC Rep. David Lewis	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 53	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277713 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>268.28</td> </tr> </table>	268.28																			
268.28																					
Candidate Name Mark Hollo	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 88	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277714 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>547.81</td> </tr> </table>	547.81																			
547.81																					
Candidate Name NC Sen. Doug Berger	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				

SUBTOTAL of Disbursements This Page (optional)

1048.32

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 846 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Richard Gunn

011
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2008
<input checked="" type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼

State: NC District:

Transaction ID: 27277715

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	0	8

Amount of Each Disbursement this Period

502.93

Independent Expenditure -
Postage**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Debbie Ann Clary

011
Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2008
<input checked="" type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼

State: NC District:

Transaction ID: 27277716

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	0	8

Amount of Each Disbursement this Period

625.42

Independent Expenditure -
Postage**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
IL Rep. Franco Coladipietro

011
Category/ Type

Office Sought:	Disbursement For:
<input checked="" type="checkbox"/> House	2008
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼

State: IL District: 45

Transaction ID: 27277754

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	0	8

Amount of Each Disbursement this Period

89.74

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

1218.09

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 847 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277755 Date of Disbursement																				
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M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>103.04</td> </tr> </table>	103.04																			
103.04																					
Candidate Name IL Rep. Dennis Reboletti	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 46	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postage																					
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277756 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>329.88</td> </tr> </table>	329.88																			
329.88																					
Candidate Name IL Rep. Kay Hatcher	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 50	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postage																					
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277757 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>134.82</td> </tr> </table>	134.82																			
134.82																					
Candidate Name IL Rep. Harry 'Randy' Ramey, Jr.	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 55	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postage																					

SUBTOTAL of Disbursements This Page (optional)

567.74

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 848 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277758 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>315.34</td> </tr> </table>	315.34																			
315.34																					
Candidate Name Ronald Wait	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 69	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277759 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>128.17</td> </tr> </table>	128.17																			
128.17																					
Candidate Name Representa Brent Hassert	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 85	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277760 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>102.73</td> </tr> </table>	102.73																			
102.73																					
Candidate Name Joan Krupa	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 92	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				

SUBTOTAL of Disbursements This Page (optional)

546.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 849 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277761 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>65.75</td> </tr> </table>	65.75																			
65.75																					
Candidate Name IL Rep. Darlene Senger	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 96	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postage																					
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277762 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>228.30</td> </tr> </table>	228.30																			
228.30																					
Candidate Name IL Sen. Matt Murphy	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postage																					
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277763 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>920.48</td> </tr> </table>	920.48																			
920.48																					
Candidate Name IL Sen. Tim Bivins	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postage																					

SUBTOTAL of Disbursements This Page (optional)

1214.53

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 850 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
IL Rep. Franco Coladipietro011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 45

Transaction ID: 27277767

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

70.95

Independent Expenditure -
Postcards**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
IL Rep. Dennis Reboletti011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 46

Transaction ID: 27277768

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

81.46

Independent Expenditure -
Postcards**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
IL Rep. Kay Hatcher011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 50

Transaction ID: 27277769

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
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Amount of Each Disbursement this Period

260.81

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

413.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277770 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>106.59</td> </tr> </table>	106.59																			
106.59																					
Candidate Name IL Rep. Harry 'Randy' Ramey, Jr.	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 55	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postcards																					
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277771 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>249.31</td> </tr> </table>	249.31																			
249.31																					
Candidate Name Ronald Wait	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 69	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postcards																					
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277772 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>101.33</td> </tr> </table>	101.33																			
101.33																					
Candidate Name Representa Brent Hassert	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 85	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postcards																					

SUBTOTAL of Disbursements This Page (optional)

457.23

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 852 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Joan Krupa

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 92

Transaction ID: 27277773

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

81.21

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
IL Rep. Darlene Senger

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 96

Transaction ID: 27277774

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

51.98

Independent Expenditure -
Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
IL Sen. Matt Murphy

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District:

Transaction ID: 27277775

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

180.49

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

313.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 853 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27277776 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>727.73</td> </tr> </table>	727.73																			
727.73																					
Candidate Name IL Sen. Tim Bivins	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District:	Independent Expenditure - Postcards																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290588 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>248.45</td> </tr> </table>	248.45																			
248.45																					
Candidate Name Mark Beaubien	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 52	Independent Expenditure - Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290589 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>102.45</td> </tr> </table>	102.45																			
102.45																					
Candidate Name Representa Sidney Mathias	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
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SUBTOTAL of Disbursements This Page (optional)

1078.63

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 854 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290590 Date of Disbursement																				
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M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	8													
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>222.37</td> </tr> </table>	222.37																			
222.37																					
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011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 64	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postage																					
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290591 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	8	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	8													
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>257.29</td> </tr> </table>	257.29																			
257.29																					
Candidate Name Renee Kosel	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 38	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postage																					
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290592 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	8	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	8													
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>162.09</td> </tr> </table>	162.09																			
162.09																					
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011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Independent Expenditure - Postage																					
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641.75																					
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SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 855 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290596 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>199.53</td> </tr> </table>	199.53																			
199.53																					
Candidate Name Mark Beaubien	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 52	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290597 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>82.28</td> </tr> </table>	82.28																			
82.28																					
Candidate Name Representa Sidney Mathias	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 53	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290673 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>178.58</td> </tr> </table>	178.58																			
178.58																					
Candidate Name IL Rep. Michael Tryon	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 64	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				

SUBTOTAL of Disbursements This Page (optional)

460.39

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 856 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Renee Kosel <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 38 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 27290674 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">206.63</div> <hr/> Independent Expenditure - Postcards	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		2	4		2	0	0	8													
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name IL Sen. Linda Holmes <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 27290675 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">130.18</div> <hr/> Independent Expenditure - Postcards	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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1	1		2	4		2	0	0	8													
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Paul Welday <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 37 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 27290728 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">35.63</div> <hr/> Independent Expenditure - Postage	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
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1	1		2	4		2	0	0	8													

SUBTOTAL of Disbursements This Page (optional)**372.44****TOTAL** This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 857 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290731 Date of Disbursement																				
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M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>68.04</td> </tr> </table>	68.04																			
68.04																					
Candidate Name Tom Ginster	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 70	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290742 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>25.17</td> </tr> </table>	25.17																			
25.17																					
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011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 75	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290743 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>120.93</td> </tr> </table>	120.93																			
120.93																					
Candidate Name Ray Franz	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				

SUBTOTAL of Disbursements This Page (optional)

214.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 858 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290748 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	8	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	8													
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>33.14</td> </tr> </table>	33.14																			
33.14																					
Candidate Name Paul Welday	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 37	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290749 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	8	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	8													
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>63.27</td> </tr> </table>	63.27																			
63.27																					
Candidate Name Tom Ginster	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 70	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290750 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	8	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	8													
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>23.40</td> </tr> </table>	23.40																			
23.40																					
Candidate Name Dan Tietema	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 75	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				

SUBTOTAL of Disbursements This Page (optional)

119.81

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 859 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Ray Franz

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 01

Transaction ID: 27290751

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

112.46

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Master Print, Inc.

Mailing Address P.O. Box 1467

City Newington State VA Zip Code 22122

Purpose of Disbursement
Independent Expenditure - Print 4 Color Cards

Candidate Name
Tim Fox

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 27290834

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

475.81

Independent Expenditure -
Print 4 Color Cards

C.

Full Name (Last, First, Middle Initial)

Master Print, Inc.

Mailing Address P.O. Box 1467

City Newington State VA Zip Code 22122

Purpose of Disbursement
Independent Expenditure - Print 4 Color Cards

Candidate Name
Brad Johnson

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 27290835

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

475.81

Independent Expenditure -
Print 4 Color Cards

SUBTOTAL of Disbursements This Page (optional)

1064.08

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 860 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Master Print, Inc.	Transaction ID: 27290836 Date of Disbursement																				
Mailing Address P.O. Box 1467	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Newington State VA Zip Code 22122	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Print 4 Color Cards	<table border="1"> <tr> <td>475.81</td> </tr> </table>	475.81																			
475.81																					
Candidate Name Elaine Sollie Herman	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Independent Expenditure - Print 4 Color Cards																				

B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290840 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>2614.82</td> </tr> </table>	2614.82																			
2614.82																					
Candidate Name Tim Fox	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Independent Expenditure - Postage																				

C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290841 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>2614.82</td> </tr> </table>	2614.82																			
2614.82																					
Candidate Name Brad Johnson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Independent Expenditure - Postage																				

SUBTOTAL of Disbursements This Page (optional)

5705.45

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 861 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostageCandidate Name
Elaine Sollie Herman011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 27290842

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

2614.82

Independent Expenditure -
Postage**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Tim Fox011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 27290846

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

151.87

Independent Expenditure -
Postcards**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Brad Johnson011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 27290847

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

151.87

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

2918.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 862 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Elaine Sollie Herman

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27290848

Date of Disbursement

/ /

Amount of Each Disbursement this Period

151.87

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
TN Rep. Jon Lundberg

Office Sought: ☒ House
☐ Senate
☐ President

State: TN District: 01

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27290869

Date of Disbursement

/ /

Amount of Each Disbursement this Period

80.84

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
TN Rep. David Hawk

Office Sought: ☒ House
☐ Senate
☐ President

State: TN District: 05

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27290870

Date of Disbursement

/ /

Amount of Each Disbursement this Period

121.27

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

353.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 863 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290871 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>163.97</td> </tr> </table>	163.97																			
163.97																					
Candidate Name TN Rep. Michael Harrison	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 09	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290872 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>94.42</td> </tr> </table>	94.42																			
94.42																					
Candidate Name Dan Ford	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 11	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290873 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postage	<table border="1"> <tr> <td>134.95</td> </tr> </table>	134.95																			
134.95																					
Candidate Name BILL DUNN	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 16	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage																				

SUBTOTAL of Disbursements This Page (optional)

393.34

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 864 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290874 Date of Disbursement																				
	Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		2	4		2	0	0	8													
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name DONNA ROWLAND	<table border="1"> <tr> <td>149.46</td> </tr> </table>	149.46																			
149.46																						
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 34 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
		Independent Expenditure - Postage																				
B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290875 Date of Disbursement																				
	Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		2	4		2	0	0	8													
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
	Purpose of Disbursement Independent Expenditure - Phone Bank Candidate Name Terri Lynn Weaver	<table border="1"> <tr> <td>90.17</td> </tr> </table>	90.17																			
90.17																						
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 40 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
		Independent Expenditure - Phone Bank																				
C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290876 Date of Disbursement																				
	Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		2	4		2	0	0	8													
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name TN Rep. Debra Maggart	<table border="1"> <tr> <td>129.14</td> </tr> </table>	129.14																			
129.14																						
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 45 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
		Independent Expenditure - Postage																				
	SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>368.77</td> </tr> </table>	368.77																			
368.77																						
	TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
TN Rep. Judd Matheny

Office Sought: ☒ House
☐ Senate
☐ President

State: TN District: 47

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27290877

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

167.49

Independent Expenditure -
Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Phone Bank

Candidate Name
Joe Carr

Office Sought: ☒ House
☐ Senate
☐ President

State: TN District: 48

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27290878

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

100.54

Independent Expenditure -
Phone Bank

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Rick Womick

Office Sought: ☒ House
☐ Senate
☐ President

State: TN District: 49

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27290879

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

53.90

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

321.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290880 Date of Disbursement
Mailing Address 8341 Beechcraft Avenue	<div> <div>11</div> <div>24</div> <div>2008</div> </div>
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
Purpose of Disbursement Independent Expenditure - Postage	<div>224.50</div>
Candidate Name TN Rep. Susan Lynn	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 57	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290881 Date of Disbursement
Mailing Address 8341 Beechcraft Avenue	<div> <div>11</div> <div>24</div> <div>2008</div> </div>
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
Purpose of Disbursement Independent Expenditure - Postage	<div>184.91</div>
Candidate Name TN Rep. J. Thomas DuBois	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 64	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290882 Date of Disbursement
Mailing Address 8341 Beechcraft Avenue	<div> <div>11</div> <div>24</div> <div>2008</div> </div>
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
Purpose of Disbursement Independent Expenditure - Postage	<div>283.37</div>
Candidate Name TN Rep. Joey Hensley	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 70	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)

692.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Vance Dennis

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 71

Transaction ID: 27290883

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

101.78

Independent Expenditure -
Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
TN Rep. Phillip Johnson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 78

Transaction ID: 27290884

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

201.90

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Barrett Rich

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 94

Transaction ID: 27290885

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

158.89

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

462.57

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Ken Yager

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: TN District:

Transaction ID: 27290886

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

591.00

Independent Expenditure -
Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
ROSALIND KURITA

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: TN District:

Transaction ID: 27290887

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

419.36

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Dolores Gresham

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: TN District:

Transaction ID: 27290888

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

645.31

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

1655.67

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
TN Rep. Jon Lundberg

011
Category/ Type

Office Sought:	Disbursement For:
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: TN District: 01

Transaction ID: 27290891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	8	

Amount of Each Disbursement this Period

65.74

Independent Expenditure -
Postcards**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
TN Rep. David Hawk

011
Category/ Type

Office Sought:	Disbursement For:
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: TN District: 05

Transaction ID: 27290892

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	8	

Amount of Each Disbursement this Period

98.61

Independent Expenditure -
Postcards**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City	State	Zip Code
Gaithersburg	MD	20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
TN Rep. Michael Harrison

011
Category/ Type

Office Sought:	Disbursement For:
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: TN District: 09

Transaction ID: 27290893

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	8	

Amount of Each Disbursement this Period

133.33

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

297.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290894 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>76.78</td> </tr> </table>	76.78																			
76.78																					
Candidate Name Dan Ford	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 11	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290895 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>109.73</td> </tr> </table>	109.73																			
109.73																					
Candidate Name BILL DUNN	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 16	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290896 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>121.53</td> </tr> </table>	121.53																			
121.53																					
Candidate Name DONNA ROWLAND	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 34	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				

SUBTOTAL of Disbursements This Page (optional)

308.04

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
Terri Lynn Weaver011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 40

Transaction ID: 27290897

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

73.32

Independent Expenditure -
Postcards**B.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
TN Rep. Debra Maggart011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 45

Transaction ID: 27290898

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

105.01

Independent Expenditure -
Postcards**C.**

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - PostcardsCandidate Name
TN Rep. Judd Matheny011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 47

Transaction ID: 27290899

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Amount of Each Disbursement this Period

136.20

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

314.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 872 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Joe Carr

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 48

Transaction ID: 27290900

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

81.75

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Rick Womick

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 49

Transaction ID: 27290901

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

43.83

Independent Expenditure -
Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
TN Rep. Susan Lynn

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 57

Transaction ID: 27290902

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

182.55

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

308.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290903 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>150.36</td> </tr> </table>	150.36																			
150.36																					
Candidate Name TN Rep. J. Thomas DuBois	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 64	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290904 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>230.43</td> </tr> </table>	230.43																			
230.43																					
Candidate Name TN Rep. Joey Hensley	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 70	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290905 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>82.77</td> </tr> </table>	82.77																			
82.77																					
Candidate Name Vance Dennis	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 71	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

463.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
TN Rep. Phillip Johnson

Office Sought: ☒ House
☐ Senate
☐ President

State: TN District: 78

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 27290906

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

164.18

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Barrett Rich

Office Sought: ☒ House
☐ Senate
☐ President

State: TN District: 94

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 27290907

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

129.20

Independent Expenditure -
Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Ken Yager

Office Sought: ☐ House
☒ Senate
☐ President

State: TN District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 27290908

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

480.57

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

773.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
ROSALIND KURITA

Office Sought: ☐ House
☒ Senate
☐ President

State: TN District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27290909

Date of Disbursement

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

341.00

Independent Expenditure -
Postcards

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Dolores Gresham

Office Sought: ☐ House
☒ Senate
☐ President

State: TN District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27290910

Date of Disbursement

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

524.74

Independent Expenditure -
Postcards

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Doug Lindgren

Office Sought: ☒ House
☐ Senate
☐ President

State: MN District: 02

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 27290913

Date of Disbursement

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

501.23

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

1366.97

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 876 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290914 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>216.78</td> </tr> </table>	216.78																			
216.78																					
Candidate Name Christine Jacobson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 55	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
B. Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 27290921 Date of Disbursement																				
Mailing Address 8341 Beechcraft Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period																				
Purpose of Disbursement Independent Expenditure - Postcards	<table border="1"> <tr> <td>850.90</td> </tr> </table>	850.90																			
850.90																					
Candidate Name FL Rep. Matt Hudson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Independent Expenditure - Postcards																				
C. Full Name (Last, First, Middle Initial) New York State Senate Republican Campaign Committee	Transaction ID: 27305093 Date of Disbursement																				
Mailing Address P.O. Box 7229	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	0	8												
City Albany State NY Zip Code 12224	Amount of Each Disbursement this Period																				
Purpose of Disbursement	<table border="1"> <tr> <td>25000.00</td> </tr> </table>	25000.00																			
25000.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

26067.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 877 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
Mike Ranzenhofer for State Senate

Mailing Address P.O. Box 771

City State Zip Code
E. Amherst NY 14051

Purpose of Disbursement
Mike Ranzenhofer, STATE SENATE 61st NY

Candidate Name
Mike Ranzenhofer

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: NY District:

Transaction ID: 27305094

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

7000.00

Mike Ranzenhofer, STATE
SENATE 61st NY

B. Full Name (Last, First, Middle Initial)
Dennis Delano for Senate

Mailing Address 2437 Berg Road

City State Zip Code
West Seneca NY 14224

Purpose of Disbursement
Dennis Delano, STATE SENATE 58th NY

Candidate Name
Dennis Delano

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: NY District:

Transaction ID: 27305095

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

7000.00

Dennis Delano, STATE SENA-
TE 58th NY

C. Full Name (Last, First, Middle Initial)
Citizens for Joe Robach

Mailing Address 76 Thorn Apple Lane

City State Zip Code
Rochester NY 14626

Purpose of Disbursement
JOSEPH ROBACH, STATE SENATE 56th NY

Candidate Name
JOSEPH ROBACH

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: NY District:

Transaction ID: 27305096

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

7000.00

JOSEPH ROBACH, STATE SENA-
TE 56th NY

SUBTOTAL of Disbursements This Page (optional)

21000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 878 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Dave Renzi for State Senate

Mailing Address 171 Clinton Street

City
Watertown

State
NY

Zip Code
13601

Purpose of Disbursement

Dave Renzi, STATE SENATE 48th NY

Candidate Name
Dave Renzi

011

Category/
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

State: NY

District:

Transaction ID: 27305098

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

6000.00

Dave Renzi, STATE SENATE
48th NY

B.

Full Name (Last, First, Middle Initial)

Friends of Senator Serf Maltese

Mailing Address P.O. Box 38

City
Middle Village

State
NY

Zip Code
11379

Purpose of Disbursement

SERPHIN MALTESE, STATE SENATE 15th NY

Candidate Name
SERPHIN MALTESE

011

Category/
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

State: NY

District:

Transaction ID: 27305166

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

2000.00

SERPHIN MALTESE, STATE SE-
NATE 15th NY

C.

Full Name (Last, First, Middle Initial)

Friends of Barbara Donno

Mailing Address P.O. Box 647

City
Manhasset

State
NY

Zip Code
11030

Purpose of Disbursement

Barbara Donno, STATE SENATE 7th NY

Candidate Name
Barbara Donno

011

Category/
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

State: NY

District:

Transaction ID: 27305167

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

Barbara Donno, STATE SENA-
TE 7th NY

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 879 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Tainter for House District 50

Mailing Address 14 Back Cove Road

City
Waldoboro

State
ME

Zip Code
04572

Purpose of Disbursement
Void - Tainter for House District 50

Candidate Name
Art Tainter

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: ME District: 50

Transaction ID: 27346681

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

-100.00

Void - Tainter for House
District 50

B.

Full Name (Last, First, Middle Initial)

Friends for Heath Mello

Mailing Address 3084 S. 40th Street, #11

City
Omaha

State
NE

Zip Code
68105

Purpose of Disbursement
Void - Friends for Heath Mello

Candidate Name
Heath Mello

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NE District:

Transaction ID: 27346881

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

-500.00

Void - Friends for Heath
Mello

SUBTOTAL of Disbursements This Page (optional)

-600.00

TOTAL This Period (last page this line number only)

207478.89

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 880 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR KEITH PEARSON

Mailing Address 22102 CAPE MAY LN

City
HUNTINGTON BEACH

State
CA

Zip Code
92646-8415

Purpose of Disbursement
Return Contribution

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 26802893

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2008

Amount of Each Disbursement this Period

2500.00

Return Contribution

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 881 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
Shelley Moore Capito For Congress

Mailing Address P.O. Box 11519

City Charleston State WV Zip Code 25339

Purpose of Disbursement

Candidate Name
Rep. Shelley Moore CapitoOffice Sought: ☒ House
☐ Senate
☐ President

State: WV District: 02

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26936935

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
Musgrave For CongressMailing Address 257 Johnstown Center Drive
#211

City Johnstown State CO Zip Code 80534

Purpose of Disbursement

Candidate Name
Marilyn MusgraveOffice Sought: ☒ House
☐ Senate
☐ President

State: CO District: 04

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26936936

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Amount of Each Disbursement this Period

4950.00

C. Full Name (Last, First, Middle Initial)
Sali For Congress

Mailing Address PO Box 71

City Kuna State ID Zip Code 83634

Purpose of Disbursement

Candidate Name
Mr. William SaliOffice Sought: ☒ House
☐ Senate
☐ President

State: ID District: 01

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26936937

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Amount of Each Disbursement this Period

2450.00

SUBTOTAL of Disbursements This Page (optional)

9400.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

John Shadegg's Friends

Mailing Address P.O. Box 45444

City
Phoenix

State
AZ

Zip Code
85064

Purpose of Disbursement

011

Category/
Type

Candidate Name

JOHN SHADEGG

Office Sought:

☒ House

☐ Senate

☐ President

State: AZ

District: 03

Disbursement For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: 26936963

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

2450.00

B.

Full Name (Last, First, Middle Initial)

Stevens For Senate Committee

Mailing Address PO Box 100879

City
Anchorage

State
AK

Zip Code
99510

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Ted Stevens

Office Sought:

☐ House

☒ Senate

☐ President

State: AK

District:

Disbursement For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: 26936964

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

4950.00

C.

Full Name (Last, First, Middle Initial)

David Schweikert For Congress

Mailing Address 15749 E El Lago

City
Fountain Hills

State
AZ

Zip Code
85268

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. David Schweikert

Office Sought:

☒ House

☐ Senate

☐ President

State: AZ

District: 05

Disbursement For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: 26936965

Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

9400.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Lee Terry For Congress

Mailing Address P.O. Box 540098

City
OmahaState
NEZip Code
68154

Purpose of Disbursement

011

Category/
TypeCandidate Name
Rep. Lee TerryOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NE District: 02

Transaction ID: 26936966

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Amount of Each Disbursement this Period

2950.00

B.

Full Name (Last, First, Middle Initial)

Thelma Drake For Congress

Mailing Address P.O. Box 61480

City
Virginia BeachState
VAZip Code
23466

Purpose of Disbursement

011

Category/
TypeCandidate Name
Thelma DrakeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District: 02

Transaction ID: 26936967

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Amount of Each Disbursement this Period

4950.00

C.

Full Name (Last, First, Middle Initial)

Friends Of Roy Blunt

Mailing Address PO Box 50100

City
SpringfieldState
MOZip Code
65805

Purpose of Disbursement

011

Category/
TypeCandidate Name
Rep. Roy BluntOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 07

Transaction ID: 26936968

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Amount of Each Disbursement this Period

2450.00

SUBTOTAL of Disbursements This Page (optional)

10350.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Friends Of John Boehner

Transaction ID: 26936969

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Mailing Address 7908 Cincinnati Dayton Road
Suite I2

Amount of Each Disbursement this Period

City State Zip Code
West Chester OH 45069

4950.00

Purpose of Disbursement

011
Category/ Type

Candidate Name
Rep. John A. BoehnerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 08

B.

Full Name (Last, First, Middle Initial)

Judy Biggert For Congress

Transaction ID: 26936970

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Mailing Address P.O. Box 637

Amount of Each Disbursement this Period

City State Zip Code
Hinsdale IL 60522

1000.00

Purpose of Disbursement

011
Category/ Type

Candidate Name
Rep. Judy BiggertOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 13

C.

Full Name (Last, First, Middle Initial)

Murtha For Congress Committee

Transaction ID: 26936971

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Mailing Address 551 Main Street, Suite 120

Amount of Each Disbursement this Period

City State Zip Code
Johnstown PA 15901

1000.00

Purpose of Disbursement

011
Category/ Type

Candidate Name
Rep. John P. MurthaOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 12

SUBTOTAL of Disbursements This Page (optional)

6950.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Adrian Smith For Congress</p> <p>Mailing Address 3321 Avenue I Suite 6</p> <p>City Scottsbluff State NE Zip Code 69361</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Adrian Smith</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NE District: 03</p>	<p>Transaction ID: 26936972 Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div> <div style="display: flex; justify-content: space-around;"> <div>10</div> <div>24</div> <div>2008</div> </div> </p> <p>Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1000.00</div> </p>
<p>B. Full Name (Last, First, Middle Initial) Schmidt For Congress Committee</p> <p>Mailing Address 771 Wards Corner Rd</p> <p>City Loveland State OH Zip Code 45140</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Jeannette Schmidt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: OH District: 02</p>	<p>Transaction ID: 26936973 Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div> <div style="display: flex; justify-content: space-around;"> <div>10</div> <div>24</div> <div>2008</div> </div> </p> <p>Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1000.00</div> </p>
<p>C. Full Name (Last, First, Middle Initial) Elizabeth Dole Committee Inc</p> <p>Mailing Address PO Box 2918</p> <p>City Raleigh State NC Zip Code 27602</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Elizabeth Dole</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NC District:</p>	<p>Transaction ID: 26936974 Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div> <div style="display: flex; justify-content: space-around;"> <div>10</div> <div>24</div> <div>2008</div> </div> </p> <p>Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">4950.00</div> </p>

SUBTOTAL of Disbursements This Page (optional)

6950.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 886 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Enzi For US Senate

Mailing Address PO Box 2775

City	State	Zip Code
Cody	WY	82414

Purpose of Disbursement

Candidate Name
Sen. Michael B. EnziOffice Sought: ☐ House
☒ Senate
☐ President

State: WY District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26936975

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Friends Of John Barrasso

Mailing Address PO Box 52008

City	State	Zip Code
Casper	WY	82605

Purpose of Disbursement

Candidate Name
Mr. John BarrassoOffice Sought: ☐ House
☒ Senate
☐ President

State: WY District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26936976

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Goode For Congress

Mailing Address 235 South Main Street

City	State	Zip Code
Rocky Mount	VA	24151

Purpose of Disbursement

Candidate Name
Rep. Virgil H. Goode, Jr.Office Sought: ☒ House
☐ Senate
☐ President

State: VA District: 05

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 26937002

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Amount of Each Disbursement this Period

2950.00

SUBTOTAL of Disbursements This Page (optional)

6450.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 887 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Murtha For Congress Committee

Mailing Address 551 Main Street, Suite 120

City
JohnstownState
PAZip Code
15901

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. John P. Murtha

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

2008

☐ Primary☒ General☐ Other (specify) ▼

State: PA

District: 12

Transaction ID: 26942436

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Amount of Each Disbursement this Period

3950.00

B.

Full Name (Last, First, Middle Initial)

Childers For Congress

Mailing Address PO Box 177

City
BoonevilleState
MSZip Code
38829

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Travis Childers

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

2008

☐ Primary☒ General☐ Other (specify) ▼

State: MS

District: 01

Transaction ID: 26942438

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Chet Edwards For Congress

Mailing Address PO Box 23273

City
WacoState
TXZip Code
76702

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Chet Edwards

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

2008

☐ Primary☒ General☐ Other (specify) ▼

State: TX

District: 17

Transaction ID: 26944828

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

7450.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 888 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
Hoosiers Supporting Buyer For Congress

Mailing Address 200 North Main St. P.O. Box 712

City Monticello State IN Zip Code 47960

Purpose of Disbursement

011

Category/
Type

Candidate Name
Rep. Steve Buyer

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 04

Transaction ID: 26944831

Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Northup For Congress

Mailing Address P.O. Box 7913

City Louisville State KY Zip Code 40257

Purpose of Disbursement

011

Category/
Type

Candidate Name
Rep. Anne M. Northup

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: KY District: 03

Transaction ID: 26944833

Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

4950.00

C. Full Name (Last, First, Middle Initial)
Andy Harris For Congress

Mailing Address PO Box 1527

City Annapolis State MD Zip Code 21404

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. Andrew Harris

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 01

Transaction ID: 26944834

Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

1450.00

SUBTOTAL of Disbursements This Page (optional)

7400.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Bartlett For Congress Committee

Mailing Address P.O. Box 245

City
MiddletownState
MDZip Code
21769

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Roscoe G. Bartlett

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2008

☐ Primary
☒ General
☐ Other (specify) ▼

State: MD

District: 06

Transaction ID: 26944835

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Culberson For Congress

Mailing Address P.O. Box 41964

City
HoustonState
TXZip Code
77241

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. John Abney Culberson

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2008

☐ Primary
☒ General
☐ Other (specify) ▼

State: TX

District: 07

Transaction ID: 26944836

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Summit PAC

Mailing Address P.O. Box 15858

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Summit PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary
☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 26972985

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Welch For Congress	Transaction ID: 26973083 Date of Disbursement																				
Mailing Address PO Box 1086	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Montpelier State VT Zip Code 05601	Amount of Each Disbursement this Period																				
Purpose of Disbursement	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Rep. Peter Welch	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Jim Gilmore For Senate	Transaction ID: 27089361 Date of Disbursement																				
Mailing Address 631 S Washington Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	6		2	0	0	8												
City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period																				
Purpose of Disbursement Debt Retirement	<table border="1"> <tr> <td>4950.00</td> </tr> </table>	4950.00																			
4950.00																					
Candidate Name Jim Gilmore	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ General Debt 2008																				
C. Full Name (Last, First, Middle Initial) Chambliss For Senate	Transaction ID: 27119895 Date of Disbursement																				
Mailing Address Post Office Box 12469	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	2		2	0	0	8												
City Atlanta State GA Zip Code 30355	Amount of Each Disbursement this Period																				
Purpose of Disbursement Run-Off Election	<table border="1"> <tr> <td>4950.00</td> </tr> </table>	4950.00																			
4950.00																					
Candidate Name Saxby Chambliss	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff2008																				

SUBTOTAL of Disbursements This Page (optional)

10900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Tom Rooney For Congress

Mailing Address 2336 S. East Ocean Blvd. #313

City State Zip Code
Stuart FL 34996

Purpose of Disbursement
Debt Retirement

Candidate Name
Mr. Tom Rooney

Office Sought: ☒ House
☐ Senate
☐ President

State: FL District: 16

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼
General Debt 2008

011
Category/
Type

Transaction ID: 27155606

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

1000.00

Debt Retirement

B.

Full Name (Last, First, Middle Initial)

Guthrie For Congress

Mailing Address PO Box 9639

City State Zip Code
Bowling Green KY 42102

Purpose of Disbursement
Debt Retirement

Candidate Name
Mr. Steven Guthrie

Office Sought: ☒ House
☐ Senate
☐ President

State: KY District: 02

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼
General Debt 2008

011
Category/
Type

Transaction ID: 27155700

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

2500.00

Debt Retirement

C.

Full Name (Last, First, Middle Initial)

Bill Cassidy For Congress

Mailing Address 3482 Drusilla Lane Suite 1

City State Zip Code
Baton Rouge LA 70809

Purpose of Disbursement
Debt Retirement

Candidate Name
Mr. William Cassidy

Office Sought: ☒ House
☐ Senate
☐ President

State: LA District: 06

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼
General Debt 2008

011
Category/
Type

Transaction ID: 27155701

Date of Disbursement

11 / 21 / 2008

Amount of Each Disbursement this Period

2500.00

Debt Retirement

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 892 / 1300

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Blaine For Congress, Inc.

Mailing Address PO Box 1526

City
ColumbiaState
MOZip Code
65205Purpose of Disbursement
Debt RetirementCandidate Name
Mr. Blaine LuetkemeyerOffice Sought: ☒ House
☐ Senate
☐ President

State: MO District: 09

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼
Primary Debt 2008011
Category/
Type

Transaction ID: 27155759

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	1	/	2	0	0	8

Amount of Each Disbursement this Period

2500.00

Debt Retirement

B.

Full Name (Last, First, Middle Initial)

Olson For Congress Committee

Mailing Address PO Box 16381

City
Sugar LandState
TXZip Code
77496Purpose of Disbursement
Debt RetirementCandidate Name
Mr. Peter OlsonOffice Sought: ☒ House
☐ Senate
☐ President

State: TX District: 22

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼
General Debt 2008011
Category/
Type

Transaction ID: 27155763

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	1	/	2	0	0	8

Amount of Each Disbursement this Period

4950.00

Debt Retirement

SUBTOTAL of Disbursements This Page (optional)

7450.00

TOTAL This Period (last page this line number only)

91700.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Edmonds Associates, Inc.

Mailing Address 8221 Old Courthouse Road, Suite 2

City Vienna State VA Zip Code 22182

Purpose of Disbursement

Prepay Media

Candidate Name

004

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 26955835

Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

-946809.00

Prepay Media

B.

Full Name (Last, First, Middle Initial)

PM Consulting Corporation

Mailing Address c/o Jennings Steine & Company
12100 Wilshire Blvd, Suite 400

City Los Angeles State CA Zip Code 90025

Purpose of Disbursement

NRA-PVF Fundraising Consulting Fee

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 27089363

Date of Disbursement

11 / 06 / 2008

Amount of Each Disbursement this Period

162304.87

NRA-PVF Fundraising Consulting Fee

C.

Full Name (Last, First, Middle Initial)

New Media Communications Inc.

Mailing Address 3046 Brecksville Road

City Richfield State OH Zip Code 44286

Purpose of Disbursement

Website Hosting / Service Fee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 27123207

Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

4281.12

Website Hosting / Service Fee

SUBTOTAL of Disbursements This Page (optional)

-780223.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

National Rifle Association of America

Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030

Purpose of Disbursement

Prepay Salary / Benefits

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 27130838

Date of Disbursement

11 / 13 / 2008

Amount of Each Disbursement this Period

14444.82

Prepay Salary / Benefits

B.

Full Name (Last, First, Middle Initial)

InfoCision Management Corporation

Mailing Address 325 Springside Drive

City State Zip Code
Akron OH 44333

Purpose of Disbursement

NRA-PVF Fundraising Telemarketing

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 27147558

Date of Disbursement

11 / 19 / 2008

Amount of Each Disbursement this Period

514168.11

NRA-PVF Fundraising Telemarketing

C.

Full Name (Last, First, Middle Initial)

The Allant Group, Inc.

Mailing Address 2056 Westings Avenue, Suite 500

City State Zip Code
Naperville IL 60563

Purpose of Disbursement

NRA-PVF Fundraising Telematching

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 27246710

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

12556.37

NRA-PVF Fundraising Telematching

SUBTOTAL of Disbursements This Page (optional)

541169.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 895 / 1300

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: 27452735 Date of Disbursement																				
Mailing Address 10501 Main Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	0	8												
City Fairfax State VA Zip Code 22030	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Fees Candidate Name	<table border="1"> <tr> <td colspan="10">5.00</td> </tr> </table>	5.00																			
5.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001	Credit Card Fees																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: 27452736 Date of Disbursement																				
Mailing Address 10501 Main Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	4		2	0	0	8												
City Fairfax State VA Zip Code 22030	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Fees Candidate Name	<table border="1"> <tr> <td colspan="10">1487.46</td> </tr> </table>	1487.46																			
1487.46																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001	Credit Card Fees																				
C. Full Name (Last, First, Middle Initial) Bank of America - NY	Transaction ID: 27452737 Date of Disbursement																				
Mailing Address 671 County Route 1	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	7		2	0	0	8												
City Pine Island State NY Zip Code 10969	Amount of Each Disbursement this Period																				
Purpose of Disbursement Account Analysis Fees Candidate Name	<table border="1"> <tr> <td colspan="10">22.48</td> </tr> </table>	22.48																			
22.48																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001	Account Analysis Fees																				

SUBTOTAL of Disbursements This Page (optional)

1514.94

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Wachovia - Account Analysis

Mailing Address P.O. Box 2080

City Jacksonville State FL Zip Code 32231

Purpose of Disbursement
Account Analysis Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 27452747

Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

11.21

Account Analysis Fees

B.

Full Name (Last, First, Middle Initial)

Wachovia - Account Analysis

Mailing Address P.O. Box 2080

City Jacksonville State FL Zip Code 32231

Purpose of Disbursement
Account Analysis Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 27452749

Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

105.93

Account Analysis Fees

C.

Full Name (Last, First, Middle Initial)

Wachovia - Account Analysis

Mailing Address P.O. Box 2080

City Jacksonville State FL Zip Code 32231

Purpose of Disbursement
Account Analysis Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 27452750

Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

1665.09

Account Analysis Fees

SUBTOTAL of Disbursements This Page (optional)

1782.23

TOTAL This Period (last page this line number only)

-235756.54

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 897 / 1300

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Edmonds Associates, Inc.Nature of Debt (Purpose):
Radio Ad Production Cost -
Estimated

Mailing Address 8221 Old Courthouse Road, Suite 2

City State ZIP Code
Vienna VA 22182

Outstanding Balance Beginning This Period

25500.00

Transaction ID: 27453251

Amount Incurred This Period

65650.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

91150.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Edmonds Associates, Inc.Nature of Debt (Purpose):
TV Ad Production - Estima-
ted Cost

Mailing Address 8221 Old Courthouse Road, Suite 2

City State ZIP Code
Vienna VA 22182

Outstanding Balance Beginning This Period

138500.00

Transaction ID: 27453252

Amount Incurred This Period

120000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

258500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Novacon Promotional ProductsNature of Debt (Purpose):
Bumper Stickers - Estim-
ated Cost

Mailing Address 11100 Pulaski Highway

City State ZIP Code
White Marsh MD 21162

Outstanding Balance Beginning This Period

1172.17

Transaction ID: 27453253

Amount Incurred This Period

0.00

Payment This Period

1172.17

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

349650.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 898 / 1300

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Prolist, Inc.Nature of Debt (Purpose):
Phone Data Matching

Mailing Address 8341 Beechcraft Avenue

City State ZIP Code
Gaithersburg MD 20879

Outstanding Balance Beginning This Period

8345.00

Transaction ID: 27453254

Amount Incurred This Period

687.01

Payment This Period

8345.00

Outstanding Balance at Close of This Period

687.01

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Prolist, Inc.Nature of Debt (Purpose):
Postage & Postcards

Mailing Address 8341 Beechcraft Avenue

City State ZIP Code
Gaithersburg MD 20879

Outstanding Balance Beginning This Period

688653.09

Transaction ID: 27453255

Amount Incurred This Period

106661.61

Payment This Period

688653.09

Outstanding Balance at Close of This Period

106661.61

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ackerman - McQueenNature of Debt (Purpose):
Radio Ad Production CostMailing Address 1601 NW Expressway
1100 The TowerCity State ZIP Code
Oklahoma City OK 73118

Outstanding Balance Beginning This Period

11000.00

Transaction ID: 27453256

Amount Incurred This Period

0.00

Payment This Period

11000.00

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

107348.62

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 899 / 1300

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Master Print, Inc.Nature of Debt (Purpose):
Print 4 Color Postcards
/ Flyers

Mailing Address P.O. Box 1467

City State ZIP Code
Newington VA 22122

Outstanding Balance Beginning This Period

83543.54

Transaction ID: 27453257

Amount Incurred This Period

1541.55

Payment This Period

83543.54

Outstanding Balance at Close of This Period

1541.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Federal Express CorporationNature of Debt (Purpose):
Shipping Expense

Mailing Address P.O. Box 371461

City State ZIP Code
Pittsburg PA 15250

Outstanding Balance Beginning This Period

2.87

Transaction ID: 27453258

Amount Incurred This Period

0.00

Payment This Period

2.87

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Edmonds Associates, Inc.Nature of Debt (Purpose):
Magazine Ad Production -
Estimated Cost

Mailing Address 8221 Old Courthouse Road, Suite 2

City State ZIP Code
Vienna VA 22182

Outstanding Balance Beginning This Period

375.00

Transaction ID: 27453259

Amount Incurred This Period

3375.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3750.00

1) SUBTOTALS This Period This Page (optional).....

5291.55

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 900 / 1300

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ackerman - McQueenNature of Debt (Purpose):
Newspaper AdMailing Address 1601 NW Expressway
1100 The TowerCity State ZIP Code
Oklahoma City OK 73118

Outstanding Balance Beginning This Period

111055.90

Transaction ID: 27453260

Amount Incurred This Period

0.00

Payment This Period

111055.90

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
BlueFront Group, LLCNature of Debt (Purpose):
On Line Advertisng

Mailing Address 44 Canal Center Plaza, Suite 200

City State ZIP Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

250000.00

Transaction ID: 27453261

Amount Incurred This Period

0.00

Payment This Period

250000.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....

462290.17

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

462290.17

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 901 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Federal Capitol Communications Corporation		Date MM / DD / YYYY 11 / 20 / 2008	
Mailing Address 1120 G Street, NW #600		Amount 1125.00	
City State Zip Code Washington DC 20005		Transaction ID: 27155459	
Purpose of Expenditure Graphic Art Design		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: GA District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	
Calendar Year-To-Date Per Election for Office Sought 1125.00		2008 [MEMO ITEM] Graphic Art Design	
Full Name (Last, First, Middle, Initial) of Payee Novacon Promotional Products		Date MM / DD / YYYY 10 / 27 / 2008	
Mailing Address 11100 Pulaski Highway		Amount 379.92	
City State Zip Code White Marsh MD 21162		Transaction ID: 26943073	
Purpose of Expenditure Bumper Stickers		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: PA District: 03	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____	
Calendar Year-To-Date Per Election for Office Sought 2931.19		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		379.92	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 902 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Novacon Promotional Products		Date MM / DD / YYYY 10 / 27 / 2008	
Mailing Address 11100 Pulaski Highway		Amount 411.74	
City State Zip Code White Marsh MD 21162		Transaction ID: 26943075	
Purpose of Expenditure Bumper Stickers		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sydney Hay		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 24139.05		2008	
Full Name (Last, First, Middle, Initial) of Payee Novacon Promotional Products		Date MM / DD / YYYY 10 / 27 / 2008	
Mailing Address 11100 Pulaski Highway		Amount 411.74	
City State Zip Code White Marsh MD 21162		Transaction ID: 26943076	
Purpose of Expenditure Bumper Stickers		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5928.44		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		823.48	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 903 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 2031.89	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26755116	
Purpose of Expenditure postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7780702.78		2008 [MEMO ITEM] postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 2031.89	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26755798	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7782734.67		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 904 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 16 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 287.81	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26755896	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 16 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 287.81	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26755929	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 905 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 75.77	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26755981	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 75.77	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26756027	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 906 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 75.77	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26756085	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: OR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Gordon H. Smith		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought -70.32		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 496.34	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26756136	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: TN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Lamar Alexander		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 496.34		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 907 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 16 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1673.87	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26756284	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
7785135.70		Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 16 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1673.87	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26756393	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
7786809.57		Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 908 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 6</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">184.41</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26756527	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7786993.98</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 6</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">184.41</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26756637	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7787178.39</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 6</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">70.33</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26756688	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7787248.72</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 6</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">70.33</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26756689	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7787319.05</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 6</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">70.33</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26756691	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: OR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Gordon H. Smith		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">0.01</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 6</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">210.13</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26756692	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: TN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Lamar Alexander		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">706.47</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 17 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3137.55	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759425	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7790456.60		2008 [MEMO ITEM]	
Postage			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 17 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3137.55	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759426	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7793594.15		2008 [MEMO ITEM]	
Postage			
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3026.32</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759427	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7796620.47</div>		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3026.32</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759428	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7799646.79</div>		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 136.84	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759429	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7799783.63		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 136.84	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759430	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7799920.47		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 17</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">136.84</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759431	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">167777.36</div>		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 17</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">57.06</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759432	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7799977.53</div>		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 57.06	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759433	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
7800034.59		Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 57.06	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759434	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Pearce		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
12005.60		Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 17 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 4121.72	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759435	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7804156.31		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 17 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 4121.72	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759436	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7808278.03		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 124.89	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759437	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 124.89	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759438	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 2261.94	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759440	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7810789.75		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 2261.94	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759441	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7813051.69		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 2331.67	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759442	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7815383.36		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 2331.67	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759443	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7817715.03		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 1 7</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">102.53</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759444	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7817817.56</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 1 7</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">102.53</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759445	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7817920.09</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 102.53	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759446	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 167879.89		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 56.45	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759447	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7817976.54		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 17 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 56.45	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759448	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7818032.99		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 17 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 56.45	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759449	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Pearce		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12062.05		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2381.00</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759450	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7820413.99</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2381.00</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759451	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7822794.99</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">116.15</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759452	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7822911.14</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">116.15</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26759453	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7823027.29</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 15531.78	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26808833	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: AK <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Ted Stevens		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 15531.77	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26808855	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Donald E. Young		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 15531.77	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808864	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7838559.06		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 15531.77	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808878	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7854090.83		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 35330.47	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808879	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: OR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Gordon H. Smith		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 35330.48		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 17665.24	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808880	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7871756.07		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 17665.24	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808891	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7889421.31		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 15791.40	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808892	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 41291.40		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 7895.71	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808893	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7897317.02		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 7895.71	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808897	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7905212.73		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3036.22	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26808921	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: AK <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Ted Stevens		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 62318.00		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3036.21	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26808922	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: AK <input checked="" type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Donald E. Young		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 18567.98		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3036.21	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808923	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7908248.94		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3036.21	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808924	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7911285.15		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 6899.41	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808925	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: OR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Gordon H. Smith		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 42229.89		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3449.71	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808927	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7914734.86		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 0</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3449.71</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808928	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7918184.57</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 0</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3047.06</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808929	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">44338.46</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1523.54	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808930	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7919708.11		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1523.54	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26808931	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7921231.65		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 21 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1340.09	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820472	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dean Andal		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 21 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2556.40	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820473	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Richard Keller		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 1</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1685.25</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820474	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 21 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Lincoln G. Diaz-Balart		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1685.25</div>		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 1</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3144.91</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820475	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Tom Feeney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">28896.35</div>		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 21 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1860.94	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26820476	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mario Diaz-Balart		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1860.94		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 21 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 4108.27	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26820477	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mark E. Souder		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 4108.27		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 21 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1263.51	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820478	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MD <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Andrew Harris		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 21 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 7979.71	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820521	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7979.71</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820685	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7937191.07</div>		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">284.70</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820747	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dean Andal		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7562.73</div>		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">528.27</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820780	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Richard Keller		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3084.67</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">354.50</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820830	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 21 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Lincoln G. Diaz-Balart		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2039.75</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">649.34</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820874	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Tom Feeney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">29545.69</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">390.26</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26820916	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mario Diaz-Balart		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2251.20</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 482.18	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26821022	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mark E. Souder		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 4590.45		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 263.87	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26821097	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MD <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Andrew Harris		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1527.38		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1476.55</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26821272	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7938667.62</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1476.55</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26821310	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7940144.17</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1390.67	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26935495	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JOHN SHADEGG		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1390.67		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 472.58	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26935496	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JOHN SHADEGG		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1863.25		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1163.64</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26935497	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Henry E. Brown, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1163.64</div>		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">396.08</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26935499	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Henry E. Brown, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1559.72</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 16007.93	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26935500	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Blaine Luetkemeyer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 1841.54	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26935501	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Blaine Luetkemeyer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 1087.03	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26935503	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 233.17	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26935504	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 1787.65	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26935505	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 23368.47		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 367.74	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26935506	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 23736.21		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 10718.50	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26935508	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7950862.67		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 1655.59	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26935509	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7952518.26		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 10718.50	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26935511	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 1655.59	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26935512	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 47459.86	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938614	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 215339.75		2008 [MEMO ITEM]	
Postage			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 46853.58	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938615	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 325049.10		2008 [MEMO ITEM]	
Postage			
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1627.93	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938616	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 326677.03		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1627.93	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938617	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 21742.86		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 23</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2909.64</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938618	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">218249.39</div>		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 23</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2909.64</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938619	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Erik Paulsen		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3248.95</div>		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 3</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1588.17</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938620	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">-10108.54</div>		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 3</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1588.17</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938621	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7516.61</div>		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 4162.67	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938622	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought -5945.87		2008 [MEMO ITEM]	
Postage			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1680.96	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938627	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 560573.02		2008 [MEMO ITEM]	
Postage			
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 1680.96	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938628	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Marilyn Musgrave		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5000.41		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 57044.74	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938629	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8021937.09		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 57044.74	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938630	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8078981.83		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 9260.13	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938631	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 227509.52		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 9125.26	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938632	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 335802.29		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 575.24	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938637	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 336377.53		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 3</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">575.23</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938638	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">22318.09</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 3</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">574.43</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938639	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">228083.95</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 574.44	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938640	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Erik Paulsen		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 3823.39		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 558.44	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938641	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought -5387.43		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 558.45	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938642	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8075.06		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 812.31	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938643	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought -4575.12		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 330.30	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938644	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 560903.32		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 330.30	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938645	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Marilyn Musgrave		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5330.71		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 11637.30	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938646	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8090619.13		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 11637.30	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938647	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8102256.43		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3431.11	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938658	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3431.11	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938659	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 1628.68	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938660	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8110747.33		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 1628.68	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938661	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8112376.01		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1104.46	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938666	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 707.57	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938667	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 1194.85	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938668	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Michael T. McCaul		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 405.99	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938669	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Michael T. McCaul		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 23</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">918.19</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938670	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: E Scott Garrett		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">918.19</div>		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 23</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">310.27</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938671	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: E Scott Garrett		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1228.46</div>		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 14334.12	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938679	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Samuel B. Graves, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 17959.43		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 1646.47	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938680	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Samuel B. Graves, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 19605.90		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 7167.05	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938681	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 823.24	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938682	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 7167.05	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938683	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8127533.35		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 23 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 823.24	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938684	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8128356.59		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">138.31</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938694	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">8128494.90</div>		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">126.51</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938695	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">8128621.41</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 138.31	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938696	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8128759.72		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 126.51	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938697	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8128886.23		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">129.93</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938700	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">8129016.16</div>		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">104.37</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938701	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">8129120.53</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">129.93</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938702	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">8129250.46</div>		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">104.37</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938703	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">8129354.83</div>		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 194.89	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938833
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 156.56	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938834
Purpose of Expenditure Postcards	Category/ Type	004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 194.89	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938835
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 156.56	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938836
Purpose of Expenditure Postcards	Category/ Type	004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 869.50	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938838
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input type="checkbox"/> House State: SC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Lindsey Graham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 735.28	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938839
Purpose of Expenditure Postcards	Category/ Type	004	Office Sought: <input type="checkbox"/> House State: SC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Lindsey Graham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 7708.88	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938841
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2816.98	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938842
Purpose of Expenditure Postcards	Category/ Type	004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 7708.88	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938843	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2816.98	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938844	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 251.62	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938846	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8151361.07		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 183.64	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938847	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8151544.71		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 251.62	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938848
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 183.64	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938849
Purpose of Expenditure Postcards	Category/ Type	004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 17617.70	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938852	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kennedy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 17617.70		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3417.47	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938853	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kennedy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 21035.17		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 8808.86	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938854
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 1708.75	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938855
Purpose of Expenditure Postcards	Category/ Type	004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8808.86</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938856	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">8171306.44</div>		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1708.75</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938857	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">8173015.19</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2614.83	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938860	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Max Baucus		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 2614.83		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 151.88	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938861	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Max Baucus		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 2766.71		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 10459.26	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938862	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8183474.45		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 607.48	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938863	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8184081.93		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 184022.98	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938869	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8368104.91		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 10524.10	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938870	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8378629.01		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2673.59	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938874	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 554.73	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938875	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2422.35</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938877	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: <u>NE</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Michael Johanns		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2422.35</div>		2008 [MEMO ITEM] Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">283.16</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938878	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: <u>NE</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Michael Johanns		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2705.51</div>		2008 [MEMO ITEM] Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2422.36	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938879	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NE <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Lee Terry		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 283.17	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938880	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NE <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Lee Terry		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3508.79	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938881
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input checked="" type="checkbox"/> House State: WY <input type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Cynthia Lummis		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postage	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 406.95	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 26938882
Purpose of Expenditure Postcards	Category/ Type	004	Office Sought: <input checked="" type="checkbox"/> House State: WY <input type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Cynthia Lummis		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
		Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1315.82	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938883	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Barrasso		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1315.82		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 152.62	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938884	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: WY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Barrasso		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1468.44		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1315.82	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938885	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Michael B. Enzi		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 152.62	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938886	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: WY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Michael B. Enzi		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 5390.47	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938887	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. William Sali		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10115.59		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
Mailing Address 8341 Beechcraft Avenue		Amount 623.00	
City Gaithersburg State MD Zip Code 20879-1509		Transaction ID: 26938888	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. William Sali		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10738.59		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 7770.24	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938889	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8386399.25		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1024.68	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938890	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8387423.93		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 7770.24	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938891	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8395194.17		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1024.68	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26938892	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8396218.85		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1513.89	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955837	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dean Andal		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9076.62		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 168.50	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955838	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Marilyn Musgrave		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5499.21		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1682.39	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 674.00	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955839	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Tom Feeney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 30219.69		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 656.89	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955840	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Peter Roskam		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5083.38		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1330.89	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 29</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">168.50</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955841	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">23904.71</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 29</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">168.50</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955842	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">18928.17</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">337.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M
12

D
04

Y
2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 319.89	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955843	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 13347.30		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 151.39	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955844	
Purpose of Expenditure Phone Data Matching		Office Sought: <input type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought -4423.73		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		471.28	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 319.89	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955845	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8394.95		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 151.39	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955846	
Purpose of Expenditure Phone Data Matching		Office Sought: <input type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Pearce		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12213.44		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		471.28	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 825.39	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955847	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: NM <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Edward Tinsley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 4900.89		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 168.50	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955848	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 29 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kuhl		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 18392.93		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		993.89	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1004 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">84.25</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955849	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">338273.81</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">84.25</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955850	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">22402.34</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">168.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1005 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">639.77</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955851	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Steve Chabot		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4970.25</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">300.00</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955856	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Tom Feeney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">30519.69</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">939.77</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

M M
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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 150.00	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955857	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 19078.17		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 375.00	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955858	
Purpose of Expenditure Phone Data Matching		Office Sought: <input type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Pearce		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12588.44		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		525.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">375.00</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955859	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: NM <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Edward Tinsley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">5275.89</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">150.00</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955860	
Purpose of Expenditure Phone Data Matching		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">338423.81</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">525.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1008 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 150.00	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955861	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 22552.34		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 300.00	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955862	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 3231.19		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		450.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 450.00	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26955864	
Purpose of Expenditure Phone Data Matching		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Charles Dent		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1431.83		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 30 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1375.45	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26967171	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8397594.30		2008	
		[MEMO ITEM]	
		Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		450.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1010 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 0</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">559.03</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26967172	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
<div style="border: 1px solid black; padding: 2px; text-align: right;">8398153.33</div>		Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 0</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1375.45</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26967173	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM]	
<div style="border: 1px solid black; padding: 2px; text-align: right;">8399528.78</div>		Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1011 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 30 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 559.03	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26967174	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8400087.81		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 30 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1517.62	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26967175	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Thomas McClintock		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1517.62		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 30 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 509.55	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26967176	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Thomas McClintock		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 2027.17		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 30 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 567.20	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26967177	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Jim Gerlach		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 567.20		2008 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1013 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 30</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">378.06</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26967178	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Jim Gerlach		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">945.26</div>		2008 [MEMO ITEM] Postcards	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 30</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">666.10</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26967179	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Charles Dent		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2097.93</div>		2008 [MEMO ITEM] Postage	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1014 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 3 0</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">230.45</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26967180	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Charles Dent		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2328.38</div>		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">619188.68</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975268	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">9019276.49</div>		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">619188.68</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 53401.35	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975270	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9072677.84		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 14037.56	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975274	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9086715.40		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		67438.91	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1404.17	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975277	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9088119.57		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 75.76	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975910	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: OR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Gordon H. Smith		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 42305.65		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1479.93	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 75.76	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975911	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9088195.33		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 75.76	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975912	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9088271.09		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		151.52	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 70.33	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975917	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: OR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Gordon H. Smith		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 42375.98		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 70.33	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975918	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9088341.42		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		140.66	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">70.33</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975919	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9088411.75</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">287.80</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975956	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9088699.55</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">358.13</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

M M
1 2

D D
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Y Y Y Y
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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 287.80	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975957	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9088987.35		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 184.41	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975974	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9089171.76		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		472.21	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">184.41</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26975975	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9089356.17</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">251.62</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982487	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9089607.79</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">436.03</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1022 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 251.62	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982488	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9089859.41		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 183.64	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982492	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9090043.05		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		435.26	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1023 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">183.64</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982493	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9090226.69</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">138.31</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982501	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9090365.00</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">321.95</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1024 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">138.31</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982502	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9090503.31</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">126.51</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982509	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9090629.82</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">264.82</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1025 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">126.51</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982510	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9090756.33</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">57.06</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982534	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Pearce		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12645.50</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">183.57</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1026 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 57.06	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982535	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9090813.39		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 57.06	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982536	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9090870.45		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		114.12	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1027 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">56.45</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982542	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Pearce		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12701.95</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">56.45</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982543	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9090926.90</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">112.90</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1028 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">56.45</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26982544	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9090983.35</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">184022.97</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26983399	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9275006.32</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">184079.42</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1029 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10524.10</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26983401	
Purpose of Expenditure Independent Expenditure - Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9285530.42</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4121.72</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26991847	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9289652.14</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">14645.82</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1030 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 4121.72	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26991879	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9293773.86		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2381.00	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26994580	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9296154.86		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		6502.72	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1031 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 31</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2381.00</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26994609	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 31</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15589.01</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26998889	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: AK <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/ Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Ted Stevens		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">17970.01</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 15589.01	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26998924	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Donald E. Young		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
34156.99			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1670.80	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26998951	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Marilyn Musgrave		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
7170.01			
(a) SUBTOTAL of Itemized Independent Expenditures		17259.81	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 31</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1670.80</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26998982	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">562574.12</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 31</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">17615.10</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999007	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">580189.22</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">19285.90</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

M
12

D
04

Y
2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 15616.73	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999044	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: GA District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 59955.19		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 24698.29	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999069	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: KY District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Mitch McConnell		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 51828.19		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		40315.02	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2926.56	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999096	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Erik Paulsen		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 6749.95		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2926.55	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999202	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 231010.50		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		5853.11	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 47574.46	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999269	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 278584.96		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 25891.51	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999293	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MS <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Roger Wicker		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 25891.51		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		73465.97	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1037 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1629.31</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999320	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">24181.65</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1629.31</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999340	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">340053.12</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">3258.62</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 46880.67	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999363	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 386933.79		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1581.12	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999389	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9976.07		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		48461.79	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1039 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1581.12	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999410	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought -2842.61		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 4121.98	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999436	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1279.37		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		5703.10	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1040 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">35431.74</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999457	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: OR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Gordon H. Smith		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">77807.72</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">132312.03</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999477	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">9430847.89</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">167743.77</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 132312.03	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999497	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9563159.92		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 832.16	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999791	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: AK <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Ted Stevens		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 78739.17		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		133144.19	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 832.16	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999827	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Donald E. Young		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 34989.15		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 89.19	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999863	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Marilyn Musgrave		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7259.20		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		921.35	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 89.19	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999911	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: CO District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 580278.41		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 940.32	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999933	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: CO District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 581218.73		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1029.51	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">833.64</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999958	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">60788.83</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1318.43</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 26999996	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Mitch McConnell		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">53146.62</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2152.07</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1045 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">156.22</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27000021	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: <u>MN</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Erik Paulsen		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">6906.17</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">156.22</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27000044	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: <u>MN</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">278741.18</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">312.44</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1046 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2539.59</div>	
Mailing Address 8341 Beechcraft Avenue		Transaction ID: 27000111	
City Gaithersburg	State MD	Zip Code 20879-1509	Office Sought: <input type="checkbox"/> House State: <u>MN</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Purpose of Expenditure Postcards	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">281280.77</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1382.12</div>	
City Gaithersburg		State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Office Sought: <input type="checkbox"/> House State: <u>MS</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Mr. Roger Wicker		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">27273.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
2008		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">3921.71</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 86.97	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27000166	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 24268.62		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 86.97	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27000188	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 387020.76		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		173.94	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2502.55	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27000234	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 389523.31		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 84.40	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27000255	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10060.47		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		2586.95	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 84.40	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27000275	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1363.77		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 220.04	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27000319	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1583.81		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		304.44	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 31</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1891.40</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27000346	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: OR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Gordon H. Smith		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">79699.12</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 31</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7063.00</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27000369	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9570222.92</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">8954.40</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7063.00</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27000396	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9577285.92</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D D 1 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">918.19</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27122792	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: E Scott Garrett		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2146.65</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">7981.19</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 1 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1194.85</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27122793	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Michael T. McCaul		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2795.69</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 1 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1056.54</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27122794	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9578342.46</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">2251.39</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1056.54	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27122795	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9579399.00		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 310.27	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27122851	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: E Scott Garrett		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 2456.92		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1366.81	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 1 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">405.99</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27122976	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Michael T. McCaul		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3201.68</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 1 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">358.15</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27122987	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9579757.15</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">764.14</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1055 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 12</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">358.15</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27122989	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9580115.30</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 20</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">25118.24</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27144039	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: <u>GA</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : <u>Runoff</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">26243.24</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">358.15</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M
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2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1056 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 20 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2502.63	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27144040	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Runoff	
Calendar Year-To-Date Per Election for Office Sought 28745.87		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1318.00	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266342	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dean Andal		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____	
Calendar Year-To-Date Per Election for Office Sought 10394.62		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1318.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1057 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2509.72	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266343	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Richard Keller		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5594.39		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1659.51	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266344	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 21 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Lincoln G. Diaz-Balart		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 3699.26		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		4169.23	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3102.04	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 27266345
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Rep. Tom Feeney		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
33621.73			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1834.43	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 27266346
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mario Diaz-Balart		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
4085.63			
(a) SUBTOTAL of Itemized Independent Expenditures		4936.47	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1059 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 5280.85	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266347	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. William Sali		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 4065.71	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266348	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mark E. Souder		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		9346.56	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1060 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1216.10	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266349	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MD <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Andrew Harris		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 2743.48		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1724.34	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266350	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 25629.05		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		2940.44	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1065.90	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266351	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 20144.07		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3559.33	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266352	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 284840.10		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		4625.23	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 3559.33	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266353	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Michele Bachmann		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 3926.37		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 14111.16	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266354	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Samuel B. Graves, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 33717.06		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		17670.49	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1063 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15794.26</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266355	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Blaine Luetkemeyer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">33643.73</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2395.94</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266356	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: NE <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Michael Johanns		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5101.45</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">18190.20</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1064 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2395.94	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 27266357
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input checked="" type="checkbox"/> House State: NE <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Rep. Lee Terry		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
5101.47			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 578.68	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 27266358
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Pearce		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
13280.63			
(a) SUBTOTAL of Itemized Independent Expenditures		2974.62	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1065 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">578.68</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266359	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NM <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Edward Tinsley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5854.57</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2639.22</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266360	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">15986.52</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">3217.90</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2061.18	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266361	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Christopher Lee		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2104.99	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266362	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 29 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kuhl		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		4166.17	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1204.71</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Gaithersburg</div> <div>State MD</div> <div>Zip Code 20879-1509</div> </div>		Transaction ID: 27266363	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/ Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Steve Chabot		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2008</div>	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2269.32</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Gaithersburg</div> <div>State MD</div> <div>Zip Code 20879-1509</div> </div>		Transaction ID: 27266364	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential	
Category/ Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Stivers		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2008</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">3474.03</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1399.21	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266365	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 4630.40		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1409.64	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266366	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Thelma Drake		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1409.64		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		2808.85	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5676.43</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266367	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. David George Reichert		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5676.43</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1431.57</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266368	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WY <input type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Cynthia Lummis		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5347.31</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">7108.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1431.57	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266369	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Barrasso		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 4368.45		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1431.57	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266370	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Michael B. Enzi		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5800.02		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		2863.14	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 2237.23	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266371	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JOHN SHADEGG		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 4100.48		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1862.99	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266372	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Henry E. Brown, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 3422.71		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		4100.22	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">46954.79</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266373	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">9627070.09</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">46954.79</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266374	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">9674024.88</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">93909.58</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">333.25</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266376	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dean Andal		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">10727.87</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">634.56</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266377	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Richard Keller		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">6228.95</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">967.81</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M
12

D
04

Y
2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">419.59</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266378	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 21 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Lincoln G. Diaz-Balart		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4118.85</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">784.33</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266379	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Tom Feeney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">34406.06</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">1203.92</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1075 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">463.82</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266380	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 25 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mario Diaz-Balart		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4549.45</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1335.23</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266381	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. William Sali		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">17354.67</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">1799.05</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1076 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1027.99	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266382	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mark E. Souder		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9684.15		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 307.48	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266383	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MD <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Andrew Harris		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 3050.96		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1335.47	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1077 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">435.99</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266384	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">26065.04</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">269.50</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266385	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">20413.57</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">705.49</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1078 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">899.95</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266386	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: <u>MN</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">285740.05</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">899.95</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266387	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: <u>MN</u> <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Michele Bachmann		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4826.32</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">1799.90</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1079 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3567.91</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266388	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Samuel B. Graves, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">37284.97</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3993.47</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266389	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Blaine Luetkemeyer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">37637.20</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">7561.38</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1080 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 605.80	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266390	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NE <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Michael Johanns		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5707.25		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 605.80	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266391	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NE <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Lee Terry		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5707.27		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	1211.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
12 / 04 / 2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1081 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 146.32	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266392	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Pearce		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 13426.95		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 146.32	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266393	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NM <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Edward Tinsley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 6000.89		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		292.64	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1082 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 667.31	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 27266394
Purpose of Expenditure Postcards	Category/ Type	004	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
16653.83			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 521.15	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 27266395
Purpose of Expenditure Postcards	Category/ Type	004	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Mr. Christopher Lee		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
2582.33			
(a) SUBTOTAL of Itemized Independent Expenditures		1188.46	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1083 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 532.23	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266396	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 29 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kuhl		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 21030.15		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 304.60	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266397	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Steve Chabot		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 6479.56		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		836.83	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1084 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">573.78</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266398	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Stivers		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">26602.16</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">353.78</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266399	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4984.18</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">927.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1085 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">356.42</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266400	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Thelma Drake		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1766.06</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1435.25</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266401	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: WA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. David George Reichert		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7111.68</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">1791.67</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 361.96	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266402	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: WY <input type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Cynthia Lummis		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5709.27		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 361.96	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266403	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: WY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Barrasso		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 6161.98		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		723.92	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1087 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">361.96</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266404	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: WY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Michael B. Enzi		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">6523.94</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">565.67</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266405	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JOHN SHADEGG		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4666.15</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">927.63</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">471.05</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266406	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Henry E. Brown, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3893.76</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11872.19</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266407	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9685897.07</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">12343.24</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1089 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11872.19</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266408	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9697769.26</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">139.59</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266415	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9697908.85</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">12011.78</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

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Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1090 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">139.59</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266416	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9698048.44</div>		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">104.67</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266423	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9698153.11</div>		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">244.26</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">104.67</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27266424	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9698257.78</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">161.29</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27275432	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9698419.07</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">265.96</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1092 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 161.29	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 27275433
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 161.29		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): <u>Runoff</u> 2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 149.42	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 27277112
Purpose of Expenditure Postcards	Category/ Type	004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 9698568.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ 2008	
(a) SUBTOTAL of Itemized Independent Expenditures		310.71	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1093 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">149.42</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277148	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9698717.91</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">869.50</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277654	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: SC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Lindsey Graham		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2474.28</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">1018.92</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1094 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">735.28</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277666	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: SC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Lindsey Graham		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3209.56</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">707.57</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277698	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">390230.88</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">1442.85</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1095 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">707.57</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277699	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9699425.48</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">707.57</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277702	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9700133.05</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">1415.14</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1096 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1104.46</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277717	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">391335.34</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1104.46</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277718	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9701237.51</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">2208.92</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1097 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1104.46	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277719	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9702341.97		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 84.24	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277764	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9702426.21		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1188.70	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1098 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">84.24</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277765	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9702510.45</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">66.60</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277777	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9702577.05</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">150.84</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1099 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">66.60</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27277778	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9702643.65</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1623.61</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27288856	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Virgil H. Goode, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1623.61</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">1690.21</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1100 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 811.81	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27288857	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9703455.46		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 811.81	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27288862	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9704267.27		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1623.62	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1101 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">559.51</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27288869	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Virgil H. Goode, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2183.12</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">279.76</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27288875	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9704547.03</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">839.27</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1102 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 279.76	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27288876	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9704826.79		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 17617.72	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289042	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kennedy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 38652.89		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		17897.48	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1103 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 8808.85	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289043	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9713635.64		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 8808.85	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289045	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9722444.49		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		17617.70	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1104 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3417.56</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289048	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kennedy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">42070.45</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1708.77</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289049	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9724153.26</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">5126.33</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1105 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1708.77	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289050	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9725862.03		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 1691.86	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289253	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Thomas McClintock		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 3719.03		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		3400.63	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1106 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 619.57	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 27289254
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Mr. Jim Gerlach		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
1564.83			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 736.45	
City Gaithersburg	State MD	Zip Code 20879-1509	Transaction ID: 27289255
Purpose of Expenditure Postage	Category/ Type	004	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Mr. Charles Dent		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
3064.83			
(a) SUBTOTAL of Itemized Independent Expenditures		1356.02	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1107 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1523.95</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289256	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9727385.98</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1523.95</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289257	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9728909.93</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">3047.90</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

M 1 2

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1108 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 713.20	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289259	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Thomas McClintock		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 4432.23		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 261.18	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289260	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Jim Gerlach		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1826.01		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		974.38	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">310.45</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289262	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Charles Dent		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3375.28</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">642.41</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289263	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9729552.34</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">952.86</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1110 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">642.41</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27289264	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9730194.75</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">81.05</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290593	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9730275.80</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">723.46</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

M 1 2

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 81.05	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290594	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9730356.85		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 65.09	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290709	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9730421.94		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		146.14	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 65.09	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290711	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9730487.03		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 124.89	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290745	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9730611.92		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		189.98	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">124.89</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290746	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9730736.81</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">116.15</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290765	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9730852.96</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">241.04</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">116.15</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290766	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9730969.11</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2614.82</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290843	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Max Baucus		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5381.53</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">2730.97</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 10459.30	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290844	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9741428.41		2008	
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 8341 Beechcraft Avenue		Amount 151.87	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290849	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Max Baucus		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5533.40		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		10611.17	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">607.52</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290850	
Purpose of Expenditure Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
<div style="border: 1px solid black; padding: 2px; text-align: right;">9742035.93</div>			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">499.16</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290889	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: TN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Lamar Alexander		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1205.63</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">1106.68</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">405.90</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290911	
Purpose of Expenditure Postcards		Office Sought: <input checked="" type="checkbox"/> House State: TN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Lamar Alexander		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1611.53</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">239.37</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290916	
Purpose of Expenditure Postage & Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">285979.42</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">645.27</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">239.37</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290917	
Purpose of Expenditure Postage & Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9742275.30</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8341 Beechcraft Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">239.37</div>	
City State Zip Code Gaithersburg MD 20879-1509		Transaction ID: 27290918	
Purpose of Expenditure Postage & Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9742514.67</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">478.74</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Ackerman - McQueen		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 1601 NW Expressway, 1100 The Tower		Amount 11000.00	
City State Zip Code Oklahoma City OK 73118-1438		Transaction ID: 26981456	
Purpose of Expenditure Radio Ad Production		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9753514.67		2008	
Full Name (Last, First, Middle, Initial) of Payee Ackerman - McQueen		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 1601 NW Expressway, 1100 The Tower		Amount 90240.00	
City State Zip Code Oklahoma City OK 73118-1438		Transaction ID: 26981494	
Purpose of Expenditure Newspaper Ad		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9843754.67		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		101240.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Ackerman - McQueen		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
Mailing Address 1601 NW Expressway, 1100 The Tower		Amount 20815.90	
City State Zip Code Oklahoma City OK 73118-1438		Transaction ID: 26981495	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9864570.57		2008	
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 8	
Mailing Address P.O. Box 371461		Amount 75.99	
City State Zip Code Pittsburgh PA 15250-7461		Transaction ID: 26758524	
Purpose of Expenditure Shipping Expense - Estimated Cost		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9864646.56		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		20815.90	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

[MEMO ITEM]

Shipping Expense - Estimated Cost

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date MM / DD / YYYY 10 / 16 / 2008	
Mailing Address P.O. Box 371461		Amount 81.32	
City State Zip Code Pittsburgh PA 15250-7461		Transaction ID: 26758525	
Purpose of Expenditure Shipping Expense - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Michele Bachmann		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 4907.64		2008 [MEMO ITEM] Shipping Expense - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address P.O. Box 371461		Amount 19.75	
City State Zip Code Pittsburgh PA 15250-7461		Transaction ID: 26802891	
Purpose of Expenditure Shipping Expense		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9864666.31		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		19.75	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address P.O. Box 371461		Amount 133.47	
City State Zip Code Pittsburgh PA 15250-7461		Transaction ID: 26938686	
Purpose of Expenditure Shipping Expense - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Anne M. Northup		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 474.69		2008 [MEMO ITEM] Shipping Expense - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address P.O. Box 371461		Amount 49.97	
City State Zip Code Pittsburgh PA 15250-7461		Transaction ID: 26938687	
Purpose of Expenditure Shipping Expense - Estimated Cost		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 286029.39		2008 [MEMO ITEM] Shipping Expense - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
Mailing Address P.O. Box 371461		Amount 41.18	
City State Zip Code Pittsburgh PA 15250-7461		Transaction ID: 26938688	
Purpose of Expenditure Shipping Expense - Estimated Cost		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9864707.49		2008 [MEMO ITEM] Shipping Expense - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
Mailing Address P.O. Box 371461		Amount 188.02	
City State Zip Code Pittsburgh PA 15250-7461		Transaction ID: 26975279	
Purpose of Expenditure Shipping Expense		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9864895.51		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		188.02	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 371461		Amount 133.47	
City State Zip Code Pittsburgh PA 15250-7461		Transaction ID: 26975281	
Purpose of Expenditure Shipping Expense		Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Anne M. Northup		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 608.16		2008	
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 371461		Amount 49.97	
City State Zip Code Pittsburgh PA 15250-7461		Transaction ID: 26975282	
Purpose of Expenditure Shipping Expense		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 286079.36		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		183.44	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 371461		Amount 41.18	
City State Zip Code Pittsburgh PA 15250-7461		Transaction ID: 26975283	
Purpose of Expenditure Shipping Expense		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 9864936.69		2008	
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 371461		Amount 28.40	
City State Zip Code Pittsburgh PA 15250-7461		Transaction ID: 26975341	
Purpose of Expenditure Shipping Expense		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5012.58		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		69.58	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Federal Express Corporation		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 12</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 371461		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">42.09</div>	
City Pittsburgh		State PA	
Zip Code 15250-7461		Transaction ID: 27123232	
Purpose of Expenditure Shipping Expense		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9864978.78</div>		2008	
Full Name (Last, First, Middle, Initial) of Payee Andrew Dysart		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 11250 Waples Mill Road		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1216.76</div>	
City Fairfax		State VA	
Zip Code 22030		Transaction ID: 27248398	
Purpose of Expenditure Travel Expense		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">002</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9866195.54</div>		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">1258.85</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Andrew Dysart		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 811.16	
City State Zip Code Fairfax VA 22030		Transaction ID: 27265848	
Purpose of Expenditure Travel Expense		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 002		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5823.74		2008	
Full Name (Last, First, Middle, Initial) of Payee BlueFront Group, LLC		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 44 Canal Center Plaza, Suite 200		Amount 250000.00	
City State Zip Code Alexandria VA 22314		Transaction ID: 26981617	
Purpose of Expenditure Online Advertising		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10116195.54		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		250811.16	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 19 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1927.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26801165	
Purpose of Expenditure Magazine Ad		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10118122.54		2008 [MEMO ITEM] Magazine Ad	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 19 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1166.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26801166	
Purpose of Expenditure Magazine Ad		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10119288.54		2008 [MEMO ITEM] Magazine Ad	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1286.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26801178	
Purpose of Expenditure Magazine Ad		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10120574.54		2008 [MEMO ITEM] Magazine Ad	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 150.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26801320	
Purpose of Expenditure Magazine Ad Production - Estimated Cost		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10120724.54		2008 [MEMO ITEM] Magazine Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 19 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 450.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26801365	
Purpose of Expenditure Magazine Ad		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10121174.54		2008 [MEMO ITEM] Magazine Ad	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 19 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 450.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26801399	
Purpose of Expenditure Magazine Ad		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10121624.54		2008 [MEMO ITEM] Magazine Ad	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 121799.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26802886	
Purpose of Expenditure TV Advertising		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10243424.04		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount -99750.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26802887	
Purpose of Expenditure Radio Ads - Credit Unused Air Time		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10143674.04		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		22049.50	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 39338.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26802889	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 45161.74		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 35000.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26806042	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10178674.04		2008	
		[MEMO ITEM]	
		Radio Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		39338.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 17500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26806043	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 408835.34		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 56000.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26806045	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10234674.04		2008 [MEMO ITEM] Radio Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 12250.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26806047	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10246924.04		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 12250.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26806050	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Mitch McConnell		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 65396.62		2008 [MEMO ITEM] Radio Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 54250.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26806052	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10301174.04		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 25500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26806053	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 86288.83		2008 [MEMO ITEM] Radio Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 0</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26806060	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">10301924.04</div>		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 0</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26806061	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Mitch McConnell		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">66146.62</div>		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 3000.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26806062	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 89288.83		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 116732.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26806067	
Purpose of Expenditure TV Advertising		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10418656.04		2008 [MEMO ITEM] TV Advertising	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1138 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 17500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26808957	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Kay Hagan		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
426335.34		Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 50431.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26813704	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
10469087.04			
(a) SUBTOTAL of Itemized Independent Expenditures		50431.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">22500.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26813727	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Donald E. Young		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">57489.15</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4177.51</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26813729	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sydney Hay		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">28316.56</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">26677.51</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 4177.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26813730	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Ann Kirkpatrick		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 32494.06		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 23200.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26813731	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JOHN SHADEGG		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 27866.15		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		27377.50	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">16369.84</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26813732	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: <u>AZ</u> <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Bee		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">16369.84</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">44193.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26813733	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Richard Keller		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">50421.95</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">60562.84</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 25500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26813734	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 114788.83		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 26149.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26813735	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mark E. Souder		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 35833.15		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		51649.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6115.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26813736	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 32180.04		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6115.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26813737	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Mark Schauer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 38295.04		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		12230.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 22</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">34928.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26813738	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: <u>MN</u> <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Michele Bachmann		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">39835.64</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 22</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4550.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26813739	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: <u>MO</u> <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Samuel B. Graves, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">41834.97</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">39478.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 4550.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26813742	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Kay Barnes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 46384.97		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 14305.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26813743	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 30958.83		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		18855.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 14305.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26813744	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Dina Titus		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 45263.83		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6224.25	
City State Zip Code Vienna VA 22182		Transaction ID: 26813745	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7808.06		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		20529.25	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6224.25</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26813746	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Jeanne Shaheen		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">14032.31</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6224.25</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26813763	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">16284.72</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">12448.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6224.25	
City State Zip Code Vienna VA 22182		Transaction ID: 26813765	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Carol Shea-Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 22508.97		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 23870.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26813766	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 48138.62		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		30094.25	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 39338.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26935456	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
84499.74		Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 3000.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26935457	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
87499.74		Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 114396.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26935459	
Purpose of Expenditure TV Advertising		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10583483.04		2008 [MEMO ITEM] TV Advertising	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 57198.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26935460	
Purpose of Expenditure TV Advertising		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 483533.34		2008 [MEMO ITEM] TV Advertising	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 57198.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26935461	
Purpose of Expenditure TV Advertising		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Kay Hagan		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 540731.34		2008 [MEMO ITEM] TV Advertising	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 10000.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26935462	
Purpose of Expenditure TV Ad Production - Estimated Cost		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10593483.04		2008 [MEMO ITEM] TV Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 5000.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26935463	
Purpose of Expenditure TV Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 545731.34		2008 [MEMO ITEM] TV Ad Production - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 5000.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26935464	
Purpose of Expenditure TV Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Kay Hagan		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 550731.34		2008 [MEMO ITEM] TV Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 205524.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26935467	
Purpose of Expenditure TV Advertising		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10799007.04		2008 [MEMO ITEM] TV Advertising	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 26 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 44125.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26942520	
Purpose of Expenditure TV Advertising		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10843132.04		2008 [MEMO ITEM] TV Advertising	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 26 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 20000.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26942521	
Purpose of Expenditure TV Ad Production - Estimated Cost		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10863132.04		2008 [MEMO ITEM] TV Ad Production - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 26 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1767.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26942523	
Purpose of Expenditure Magazine Ad		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10864899.04		2008 [MEMO ITEM] Magazine Ad	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">225.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26942524	
Purpose of Expenditure Magazine Ad Production Cost		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">10865124.04</div>		2008 [MEMO ITEM] Magazine Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1927.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26942525	
Purpose of Expenditure Magazine Ad		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">10867051.04</div>		2008 [MEMO ITEM] Magazine Ad	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1156 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">150.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26942526	
Purpose of Expenditure Magazine Ad Production Cost		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">10867201.04</div>		2008 [MEMO ITEM] Magazine Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">26394.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26942115	
Purpose of Expenditure Newspaper Ad		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">10893595.04</div>		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">26394.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1157 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 27849.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26942120	
Purpose of Expenditure Newspaper Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 41881.31		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 3298.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26942127	
Purpose of Expenditure Newspaper Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10896893.04		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		31147.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2185.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26942133	
Purpose of Expenditure Newspaper Ad		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">10899078.04</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">38500.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26947860	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">10937578.04</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

2185.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1159 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15750.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26947861	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">10953328.04</div>		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6737.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26955809	
Purpose of Expenditure Newspaper Ads		Office Sought: <input type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">48618.31</div>		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">6737.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1160 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 27 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6737.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26955811	
Purpose of Expenditure Newspaper Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Jeanne Shaheen		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 55355.31		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 27 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 9344.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26955812	
Purpose of Expenditure Newspaper Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10962672.04		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		16081.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1161 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 28</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">34976.50</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165290	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">616195.23</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 28</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">34976.50</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165291	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">10997648.54</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">69953.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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04

Y
2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1162 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 3625.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26165292	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 619820.23		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 3625.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26165293	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Marilyn Musgrave		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 10884.20		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		7250.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 28</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">56448.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165294	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11054096.54</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 28</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">24869.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165296	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Mitch McConnell		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">91015.62</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">81317.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

 Signature

Date

M
12

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04

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2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1164 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 24869.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26165297	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 11078965.54		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 22119.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26165298	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kennedy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 64189.45		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		46988.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1165 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 28</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">22119.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165299	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11101084.54</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 28</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">85085.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165300	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11186169.54</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">107204.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1166 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 81538.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26165301	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 367617.36		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 13617.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26165302	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Michele Bachmann		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 53452.64		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		95155.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">13617.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165304	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: <u>MN</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">381234.36</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15077.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165305	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: <u>MS</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Roger Wicker		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">42350.63</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">28694.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15077.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165306	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11201246.54</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">19930.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165307	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11221176.54</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">35007.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 4357.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26165310	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Samuel B. Graves, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 50741.97		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 4357.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26165311	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 11225533.54		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		8714.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1170 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">44030.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165312	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11269563.54</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11195.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165313	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">56458.83</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">55225.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1171 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 12233.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26165314	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 67588.31		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 4282.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26165315	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 71870.81		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		16515.50	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1172 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 4282.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26165316	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 76153.31		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 24352.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26165317	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Pearce		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 37779.45		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		28635.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1173 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 28</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">24352.50</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165318	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">11293916.04</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 28</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">40689.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165319	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">591420.34</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">65041.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1174 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11124.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165320	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">602544.34</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11124.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165321	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">59262.62</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">22248.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1175 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">67838.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165322	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11361754.04</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9003.50</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165323	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Steve Chabot		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">15483.06</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">76841.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 9003.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26165324	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 11370757.54		2008	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 10467.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26165325	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Stivers		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 37069.66		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		19471.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10467.50</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165326	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11381225.04</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">81894.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165327	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11463119.04</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">92361.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 28</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">53956.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165328	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11517075.04</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 28</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">18116.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26165329	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11535191.04</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">72072.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

 Signature

Date

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2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1179 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 3721.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26955756	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Stivers		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Newspaper Polybag Ads	
40790.66			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6746.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26955759	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Stivers		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Newspaper Ad Production Cost	
47537.16			
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1180 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 3721.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26955802	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 11538912.04		2008 [MEMO ITEM] Newspaper Polybag Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 28 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6746.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26955803	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 11545658.54		2008 [MEMO ITEM] Newspaper Ad Production Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1181 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">14875.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26957208 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure Radio Ads		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26957226 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">14875.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26957278	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Mitch McConnell		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">105890.62</div>		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26957279	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Mitch McConnell		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">106640.62</div>		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 43750.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26957281	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Donald E. Young		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 3000.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26957282	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Donald E. Young		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 50431.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26957359	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 11611714.54		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 20000.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26957360	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 11631714.54		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 22500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966836	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Donald E. Young		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 126739.15		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 4177.51	
City State Zip Code Vienna VA 22182		Transaction ID: 26966837	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sydney Hay		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 36671.57		2008 [MEMO ITEM] Radio Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1250.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966838	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sydney Hay		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 37921.57		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 4177.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26966839	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Ann Kirkpatrick		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 42099.07		2008 [MEMO ITEM] Radio Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1250.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966840	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Ann Kirkpatrick		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 43349.07		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 23200.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966841	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JOHN SHADEGG		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 51066.15		2008 [MEMO ITEM] Radio Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 2500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966842	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JOHN SHADEGG		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 53566.15		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 16369.84	
City State Zip Code Vienna VA 22182		Transaction ID: 26966843	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Bee		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 32739.68		2008 [MEMO ITEM] Radio Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 2500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966844	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Bee		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 35239.68		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 44193.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966845	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Richard Keller		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 94614.95		2008 [MEMO ITEM] Radio Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 2500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966846	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Richard Keller		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 97114.95		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 25500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966847	
Purpose of Expenditure Radio Ads		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 140288.83		2008 [MEMO ITEM] Radio Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 26149.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966848	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mark E. Souder		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 2500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966849	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mark E. Souder		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6115.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966850	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 44410.04		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1250.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966851	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 45660.04		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6115.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966852	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Mark Schauer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 51775.04		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1250.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966853	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Mark Schauer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 53025.04		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">34928.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26966854	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Michele Bachmann		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">88380.64</div>		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2500.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26966855	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Michele Bachmann		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">90880.64</div>		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 4550.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966856	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Samuel B. Graves, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 55291.97		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1250.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966857	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Samuel B. Graves, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 56541.97		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 4550.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966858	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Kay Barnes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 61091.97		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1250.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966859	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Kay Barnes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 62341.97		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 14305.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966861	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
70763.83		Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1250.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966862	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
72013.83		Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 14305.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966864	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Dina Titus		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 86318.83		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1250.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26966929	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Dina Titus		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 87568.83		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6224.25</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26967098	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">82377.56</div>		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">625.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26967100	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">83002.56</div>		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6224.25	
City State Zip Code Vienna VA 22182		Transaction ID: 26967102	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Jeanne Shaheen		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
89226.81		Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 625.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26967103	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Jeanne Shaheen		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
89851.81		Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6224.25	
City State Zip Code Vienna VA 22182		Transaction ID: 26967106	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 625.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26967108	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6224.25</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26967110	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Carol Shea-Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35582.47</div>		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">625.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26967112	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Carol Shea-Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">36207.47</div>		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 23870.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26967114	
Purpose of Expenditure Radio Ads		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 83132.62		2008 [MEMO ITEM] Radio Ads	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 2500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26967116	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 85632.62		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 294159.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26967122	
Purpose of Expenditure TV Advertising		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 11925873.54		2008 [MEMO ITEM] TV Advertising	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 189793.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26967126	
Purpose of Expenditure TV Advertising		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12115666.54		2008 [MEMO ITEM] TV Advertising	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 29071.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26967128	
Purpose of Expenditure Newspaper Ad		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12144737.54		2008 [MEMO ITEM] Newspaper Ad	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26967129	
Purpose of Expenditure Newspaper Ad Production - Estimated Cost		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12145237.54		2008 [MEMO ITEM] Newspaper Ad Production - Estimated Cost	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 2185.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26967131	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12147422.54		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 8	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 17338.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26972333	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12164760.54		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 30 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 39110.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26972334	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12203870.54		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 30 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 8209.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26972335	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Mitch McConnell		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 114849.62		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 30 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 16660.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26972336	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input checked="" type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Mitch McConnell		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 131509.62		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 30 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 8209.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26972338	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12212079.54		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 30 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 16660.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26972339	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12228739.54		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 31930.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26975926	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12260669.54		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 35908.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26975927	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12296577.54		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 2493.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26975928	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Steve Chabot		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 17976.56		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6510.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26975929	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Steve Chabot		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 24486.56		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 2493.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26975930	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12299071.04		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 31</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6510.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26975931	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12305581.04</div>		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 01</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3934.50</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26975936	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: MS <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Roger Wicker		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">46285.13</div>		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 01 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 11142.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26975937	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input checked="" type="checkbox"/> House State: MS <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Roger Wicker		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 57427.63		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 01 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 3934.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26975938	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12309515.54		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 01 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 11142.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26975939	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12320658.04		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 02 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 7224.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26978137	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12327882.04		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 02 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 10892.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26978139	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12338774.04		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 02 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 7574.00	
City State Zip Code Vienna VA 22182		Transaction ID: 26978140	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential State: _____ District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12346348.04		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12356.00</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26978141	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12358704.04</div>		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5031.50</div>	
City State Zip Code Vienna VA 22182		Transaction ID: 26978142	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">607575.84</div>		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 02 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6092.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26978143	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 613668.34		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 02 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 5031.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26978145	
Purpose of Expenditure Newspaper Polybag Ads		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 90664.12		2008 [MEMO ITEM] Newspaper Polybag Ads	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 02 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 6092.50	
City State Zip Code Vienna VA 22182		Transaction ID: 26978146	
Purpose of Expenditure Newspaper Ad Production Cost		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 96756.62		2008 [MEMO ITEM] Newspaper Ad Production Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 13 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 25200.00	
City State Zip Code Vienna VA 22182		Transaction ID: 27124480	
Purpose of Expenditure Radio Advertising		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Runoff	
Calendar Year-To-Date Per Election for Office Sought 53945.87		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		25200.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 13 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 25200.00	
City State Zip Code Vienna VA 22182		Transaction ID: 27124481	
Purpose of Expenditure Radio Advertising		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: GA District: _____	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. James Martin		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): <u>Runoff</u> 2008	
Calendar Year-To-Date Per Election for Office Sought 79145.87			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 17 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 25200.00	
City State Zip Code Vienna VA 22182		Transaction ID: 27136954	
Purpose of Expenditure Radio Advertising		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: GA District: _____	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): <u>Runoff</u> 2008	
Calendar Year-To-Date Per Election for Office Sought 104345.87		[MEMO ITEM] Radio Advertising	
(a) SUBTOTAL of Itemized Independent Expenditures		25200.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 17 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 27136956	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): <u>Runoff</u>	
Calendar Year-To-Date Per Election for Office Sought 105845.87		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 17 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 25200.00	
City State Zip Code Vienna VA 22182		Transaction ID: 27136957	
Purpose of Expenditure Radio Advertising		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. James Martin		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): <u>Runoff</u>	
Calendar Year-To-Date Per Election for Office Sought 131045.87		2008 [MEMO ITEM] Radio Advertising	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Edmonds Associates, Inc.		Date MM / DD / YYYY 11 / 17 / 2008	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount 1500.00	
City State Zip Code Vienna VA 22182		Transaction ID: 27136958	
Purpose of Expenditure Radio Ad Production - Estimated Cost		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. James Martin		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Runoff	
Calendar Year-To-Date Per Election for Office Sought 132545.87		2008 [MEMO ITEM] Radio Ad Production - Estimated Cost	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address P.O. Box 1467		Amount 1355.46	
City State Zip Code Newington VA 22122		Transaction ID: 26808543	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: AK <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Ted Stevens		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____	
Calendar Year-To-Date Per Election for Office Sought 80094.63		2008 [MEMO ITEM] Print Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address P.O. Box 1467		Amount 1355.47	
City State Zip Code Newington VA 22122		Transaction ID: 26808544	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Donald E. Young		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 20 / 2008	
Mailing Address P.O. Box 1467		Amount 1355.47	
City State Zip Code Newington VA 22122		Transaction ID: 26808545	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 1355.47	
City State Zip Code Newington VA 22122		Transaction ID: 26808546	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 3080.80	
City State Zip Code Newington VA 22122		Transaction ID: 26808547	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: OR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Gordon H. Smith		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 0</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1540.40</div>	
City State Zip Code Newington VA 22122		Transaction ID: 26808548	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12362955.38</div>		2008 [MEMO ITEM] Print Postcards	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 0</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1540.40</div>	
City State Zip Code Newington VA 22122		Transaction ID: 26808549	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12364495.78</div>		2008 [MEMO ITEM] Print Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00053553</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 0</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1357.88</div>	
City State Zip Code Newington VA 22122		Transaction ID: 26808550	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">141646.71</div>		2008 [MEMO ITEM] Print Postcards	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 0</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">678.94</div>	
City State Zip Code Newington VA 22122		Transaction ID: 26808551	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12365174.72</div>		2008 [MEMO ITEM] Print Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 0</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">678.94</div>	
City State Zip Code Newington VA 22122		Transaction ID: 26808557	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2008 12365853.66</div> <div style="text-align: right;">[MEMO ITEM]</div>	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 3</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4136.60</div>	
City State Zip Code Newington VA 22122		Transaction ID: 26937947	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2008 385370.96</div> <div style="text-align: right;">[MEMO ITEM]</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 4964.56	
City State Zip Code Newington VA 22122		Transaction ID: 26937948	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 4964.56	
City State Zip Code Newington VA 22122		Transaction ID: 26937950	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 4076.27	
City State Zip Code Newington VA 22122		Transaction ID: 26937951	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 141.66	
City State Zip Code Newington VA 22122		Transaction ID: 26937954	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 141.67	
City State Zip Code Newington VA 22122		Transaction ID: 26937955	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 254.47	
City State Zip Code Newington VA 22122		Transaction ID: 26937958	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 254.47	
City State Zip Code Newington VA 22122		Transaction ID: 26937959	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Erik Paulsen		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 137.48	
City State Zip Code Newington VA 22122		Transaction ID: 26937962	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 137.48	
City State Zip Code Newington VA 22122		Transaction ID: 26937963	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 358.39	
City State Zip Code Newington VA 22122		Transaction ID: 26937966	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 145.27	
City State Zip Code Newington VA 22122		Transaction ID: 26937969	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
619965.50			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 145.28	
City State Zip Code Newington VA 22122		Transaction ID: 26937970	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Marilyn Musgrave		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print Postcards	
11029.48			
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address P.O. Box 1467		Amount 1903.22	
City Newington		Transaction ID: 26938865	
State VA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Zip Code 22122		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Purpose of Expenditure Print 4 Color Cards		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Category/Type 004		2008 [MEMO ITEM] Print 4 Color Cards	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain			
Calendar Year-To-Date Per Election for Office Sought		12377686.00	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address P.O. Box 1467		Amount 475.81	
City Newington		Transaction ID: 26938866	
State VA		Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Zip Code 22122		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Purpose of Expenditure Print 4 Color Cards		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Category/Type 004		2008 [MEMO ITEM] Print 4 Color Cards	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Max Baucus			
Calendar Year-To-Date Per Election for Office Sought		6009.21	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 25619.14	
City State Zip Code Newington VA 22122		Transaction ID: 26938872	
Purpose of Expenditure Print 4 Color Cards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM] Print 4 Color Cards	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 60918.20	
City State Zip Code Newington VA 22122		Transaction ID: 26975266	
Purpose of Expenditure Print 4 Color Cards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		60918.20	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 1674.80	
City State Zip Code Newington VA 22122		Transaction ID: 26975272	
Purpose of Expenditure Print 4 Color Cards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12465898.14		2008	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 9642.15	
City State Zip Code Newington VA 22122		Transaction ID: 26982440	
Purpose of Expenditure Flyers		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12475540.29		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		11316.95	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 25619.14	
City State Zip Code Newington VA 22122		Transaction ID: 26983393	
Purpose of Expenditure Print 4 Color Cards		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12501159.43		2008	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 1355.36	
City State Zip Code Newington VA 22122		Transaction ID: 26997747	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: AK <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Ted Stevens		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 81449.99		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		26974.50	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 1355.36	
City State Zip Code Newington VA 22122		Transaction ID: 26997777	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Donald E. Young		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 145.27	
City State Zip Code Newington VA 22122		Transaction ID: 26997820	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Marilyn Musgrave		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1500.63	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 145.27	
City State Zip Code Newington VA 22122		Transaction ID: 26997857	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 1531.52	
City State Zip Code Newington VA 22122		Transaction ID: 26997952	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1676.79	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 1357.77	
City State Zip Code Newington VA 22122		Transaction ID: 26997979	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 2147.35	
City State Zip Code Newington VA 22122		Transaction ID: 26998006	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Mitch McConnell		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		3505.12	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 254.44	
City State Zip Code Newington VA 22122		Transaction ID: 26998027	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Erik Paulsen		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
7415.08			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 254.44	
City State Zip Code Newington VA 22122		Transaction ID: 26998094	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
385879.87			
(a) SUBTOTAL of Itemized Independent Expenditures		508.88	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 4136.28	
City State Zip Code Newington VA 22122		Transaction ID: 26998116	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
390016.15			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 2251.09	
City State Zip Code Newington VA 22122		Transaction ID: 26998164	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: MS <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Roger Wicker		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
59678.72			
(a) SUBTOTAL of Itemized Independent Expenditures		6387.37	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1242 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 31</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">141.66</div>	
City Newington		Transaction ID: 26998196	
State VA		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Zip Code 22122		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Purpose of Expenditure Print Postcards		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Category/ Type		2008	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">97039.95</div>	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 31</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">141.66</div>	
City Newington		Transaction ID: 26998217	
State VA		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Zip Code 22122		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Purpose of Expenditure Print Postcards		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Category/ Type		2008	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">618027.93</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">283.32</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 4075.96	
City Newington		Transaction ID: 26998239	
State VA		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Zip Code 22122		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Purpose of Expenditure Print Postcards		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Category/Type 004		2008	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole			
Calendar Year-To-Date Per Election for Office Sought		622103.89	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 10 / 31 / 2008	
Mailing Address P.O. Box 1467		Amount 137.47	
City Newington		Transaction ID: 26998270	
State VA		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Zip Code 22122		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Purpose of Expenditure Print Postcards		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Category/Type 004		2008	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley			
Calendar Year-To-Date Per Election for Office Sought		36482.42	
(a) SUBTOTAL of Itemized Independent Expenditures		4213.43	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">137.47</div>	
City State Zip Code Newington VA 22122		Transaction ID: 26998302	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">90485.15</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 3 1</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">358.38</div>	
City State Zip Code Newington VA 22122		Transaction ID: 26998332	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">90843.53</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">495.85</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 31</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3080.55</div>	
City Newington		State VA	
Zip Code 22122		Transaction ID: 26998356	
Purpose of Expenditure Print Postcards		Office Sought: <input checked="" type="checkbox"/> House State: <u>OR</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Gordon H. Smith		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
<div style="border: 1px solid black; padding: 2px; text-align: right;">85860.47</div>			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 31</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11503.65</div>	
City Newington		State VA	
Zip Code 22122		Transaction ID: 26998383	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
<div style="border: 1px solid black; padding: 2px; text-align: right;">12512663.08</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">14584.20</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 11503.65	
City State Zip Code Newington VA 22122		Transaction ID: 26998409	
Purpose of Expenditure Print Postcards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12524166.73		2008	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 8	
Mailing Address P.O. Box 1467		Amount 199.71	
City State Zip Code Newington VA 22122		Transaction ID: 27089657	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sydney Hay		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 43548.78		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		11703.36	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1247 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">199.71</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089658	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: <u>AZ</u> <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Ann Kirkpatrick		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">43748.49</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">199.71</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089663	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: <u>CA</u> <input type="checkbox"/> Senate District: <u>11</u> <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dean Andal		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">10927.58</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">399.42</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

M
12

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04

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2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 199.71	
City State Zip Code Newington VA 22122		Transaction ID: 27089664	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jerry McNerney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 193.46	
City State Zip Code Newington VA 22122		Transaction ID: 27089666	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Markey		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		393.17	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">193.46</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089667	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Marilyn Musgrave		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2008</div>	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">386.94</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089669	
Purpose of Expenditure Flyers		Office Sought: <input type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2008</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">580.40</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">155.97</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089670	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Tom Feeney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2008</div>	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">155.97</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089676	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Suzanne Kosmas		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2008</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">311.94</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1251 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">199.72</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089679	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: <u> ID </u> <input type="checkbox"/> Senate District: <u> 01 </u> <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Walter Minnick		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">17554.39</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">199.72</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089681	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: <u> ID </u> <input type="checkbox"/> Senate District: <u> 01 </u> <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. William Sali		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">17754.11</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">399.44</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 143.47	
City State Zip Code Newington VA 22122		Transaction ID: 27089682	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Jill Morgenthau		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 143.47	
City State Zip Code Newington VA 22122		Transaction ID: 27089683	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Peter Roskam		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		286.94	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 127.84	
City State Zip Code Newington VA 22122		Transaction ID: 27089684	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Mark Schauer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
53152.88			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 127.84	
City State Zip Code Newington VA 22122		Transaction ID: 27089685	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
53280.72			
(a) SUBTOTAL of Itemized Independent Expenditures		255.68	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">127.84</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089686	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">20541.41</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">127.84</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089687	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Gary Peters		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">20669.25</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">255.68</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 193.47	
City State Zip Code Newington VA 22122		Transaction ID: 27089688	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Kay Barnes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 62535.44		2008	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 193.47	
City State Zip Code Newington VA 22122		Transaction ID: 27089690	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Samuel B. Graves, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 62728.91		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		386.94	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 187.22	
City State Zip Code Newington VA 22122		Transaction ID: 27089691	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 36669.64		2008	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 187.22	
City State Zip Code Newington VA 22122		Transaction ID: 27089692	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Carol Shea-Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 36856.86		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		374.44	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 187.22	
City State Zip Code Newington VA 22122		Transaction ID: 27089693	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Jeanne Shaheen		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
91030.75			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 187.22	
City State Zip Code Newington VA 22122		Transaction ID: 27089694	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
91217.97			
(a) SUBTOTAL of Itemized Independent Expenditures		374.44	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 205.97	
City State Zip Code Newington VA 22122		Transaction ID: 27089696	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: NM <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Edward Tinsley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
6206.86			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 205.97	
City State Zip Code Newington VA 22122		Transaction ID: 27089697	
Purpose of Expenditure Flyers		Office Sought: <input type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Pearce		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
37985.42			
(a) SUBTOTAL of Itemized Independent Expenditures		411.94	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1259 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">424.44</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089698	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2008</div>	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">349.44</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089699	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 29 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kuhl		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2008</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">773.88</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1260 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 336.94	
City State Zip Code Newington VA 22122		Transaction ID: 27089701	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
97376.89			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date MM / DD / YYYY 11 / 06 / 2008	
Mailing Address P.O. Box 1467		Amount 168.47	
City State Zip Code Newington VA 22122		Transaction ID: 27089702	
Purpose of Expenditure Flyers		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
622272.36			
(a) SUBTOTAL of Itemized Independent Expenditures		505.41	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">168.47</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089703	
Purpose of Expenditure Flyers		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Kay Hagan		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">622440.83</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">168.47</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089704	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Steve Chabot		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">24655.03</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">336.94</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">168.47</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089706	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steven Driehaus		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">24823.50</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">336.94</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089708	
Purpose of Expenditure Flyers		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">87836.68</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">505.41</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 06</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4555.22</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27089710	
Purpose of Expenditure Flyers		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12528721.95</div>		2008	
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 20</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5184.46</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27144036	
Purpose of Expenditure Print 4 Color Cards		Office Sought: <input type="checkbox"/> House State: <u>GA</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Saxby Chambliss		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Runoff</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">137730.33</div>		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">9739.68</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 04</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">475.81</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27290837	
Purpose of Expenditure Print 4 Color Cards		Office Sought: <input checked="" type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Max Baucus		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">6485.02</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address P.O. Box 1467		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1903.22</div>	
City State Zip Code Newington VA 22122		Transaction ID: 27290838	
Purpose of Expenditure Print 4 Color Cards		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">12530625.17</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2379.03</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1265 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 1 7</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 11250 Waples Mill Road		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">684.40</div>	
City State Zip Code Fairfax VA 22030		Transaction ID: 26758528	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12531309.57</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 4</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 11250 Waples Mill Road		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">519.10</div>	
City State Zip Code Fairfax VA 22030		Transaction ID: 26938691	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12531828.67</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">1203.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

Date

M 1 2

D 0 4

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SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1266 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 29.40	
City State Zip Code Fairfax VA 22030		Transaction ID: 26938692	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 390045.55		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 6364.64	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967139	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12538193.31		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		6394.04	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1267 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 11250 Waples Mill Road		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5582.30</div>	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967141	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12543775.61</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 11250 Waples Mill Road		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2432.74</div>	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967142	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Tom Feeney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">37150.74</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">8015.04</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1268 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 985.92	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967143	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Steve Chabot		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 25809.42		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 1225.40	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967144	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NM <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Edward Tinsley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7432.26		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		2211.32	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 808.76	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967145	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Marilyn Musgrave		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12370.43		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 808.76	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967146	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 622837.99		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1617.52	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 1281.70	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967147	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Peter Roskam		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 6652.02		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 650.71	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967148	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 623091.54		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1932.41	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 650.71	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967149	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 98027.60		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 735.24	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967150	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dean Andal		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 11862.53		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1385.95	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 11250 Waples Mill Road		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">784.26</div>	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967151	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">37641.12</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 11250 Waples Mill Road		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">808.76</div>	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967152	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">92026.73</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">1593.02</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 1593.02	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967153	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 89586.29		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 880.45	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967154	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Samuel B. Graves, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 63609.36		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		2473.47	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 2462.80	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967155	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sydney Hay		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 46211.29		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 5070.43	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967157	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12548846.04		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		7533.23	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 722.11	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967158	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 21391.36		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 722.11	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967159	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 29 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kuhl		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 22101.70		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1444.22	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 1203.65	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967160	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 89040.33		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 722.12	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967161	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 54002.84		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1925.77	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1277 / 1300

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 11250 Waples Mill Road		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">346.65</div>	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967163	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">12549192.69</div>		2008	

Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 0 8</div> </div>	
Mailing Address 11250 Waples Mill Road		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">24.09</div>	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967164	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Anne M. Northup		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">632.25</div>		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">370.74</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

 Signature

Date

M 1 2

D 0 4

Y 2 0 0 8

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 31.60	
City State Zip Code Fairfax VA 22030		Transaction ID: 26967165	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Norm Coleman		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 390077.15		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 3461.04	
City State Zip Code Fairfax VA 22030		Transaction ID: 26975933	
Purpose of Expenditure Prepay E-Mail Alert		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12552653.73		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		3492.64	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 3461.03	
City State Zip Code Fairfax VA 22030		Transaction ID: 26975934	
Purpose of Expenditure Prepay E-Mail Alert		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12556114.76		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 564.03	
City State Zip Code Fairfax VA 22030		Transaction ID: 26978268	
Purpose of Expenditure Prepay E-Mail Alert		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12556678.79		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		4025.06	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 564.02	
City State Zip Code Fairfax VA 22030		Transaction ID: 26978269	
Purpose of Expenditure Prepay E-Mail Alert		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12557242.81		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 564.03	
City State Zip Code Fairfax VA 22030		Transaction ID: 26978202	
Purpose of Expenditure Prepay E-Mail Alert		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12557806.84		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		564.02	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 02 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 564.02	
City State Zip Code Fairfax VA 22030		Transaction ID: 26978206	
Purpose of Expenditure Prepay E-Mail Alert		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12558370.86		2008 [MEMO ITEM] Prepay E-Mail Alert	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 6379.40	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123209	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12564750.26		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		6379.40	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 2477.12	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123210	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Tom Feeney		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 39627.86		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 1002.46	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123211	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Steve Chabot		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 26811.88		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		3479.58	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 1238.56	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123212	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NM <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Edward Tinsley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8670.82		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 820.64	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123213	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Marilyn Musgrave		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 13191.07		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		2059.20	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 820.64	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123214	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Robert Schaffer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 623658.63		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 1297.67	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123215	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Peter Roskam		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 7949.69		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		2118.31	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 673.64	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123216	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elizabeth Dole		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 623765.18		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 673.64	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123217	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Robin C. Hayes		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 98701.24		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1347.28	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 1238.55	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123218	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dean Andal		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 13101.08		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 792.67	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123219	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jeb Bradley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 38433.79		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		2031.22	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 817.45	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123220	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Sununu		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 92844.18		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 1733.98	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123221	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jon C. Porter		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 91320.27		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		2551.43	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 179.25	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123222	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Samuel B. Graves, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 63788.61		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 2477.11	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123223	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Sydney Hay		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 48688.40		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		2656.36	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 5882.89	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123224	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John S. McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12570633.15		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 3883.24	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123226	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12574516.39		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		9766.13	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 1028.12	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123227	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 22419.48		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 541.59	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123228	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 29 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kuhl		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 22643.29		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1569.71	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 441.29	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123229	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 89481.62		2008	
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date MM / DD / YYYY 11 / 12 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 677.08	
City State Zip Code Fairfax VA 22030		Transaction ID: 27123230	
Purpose of Expenditure Prepay Salary / Benefits		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 54679.92		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1118.37	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee NRA Institute for Legislative Action		Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 1817.17	
City State Zip Code Fairfax VA 22030		Transaction ID: 26942413	
Purpose of Expenditure Travel Expense		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 29 <input type="checkbox"/> Presidential	
Category/Type 002		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Kuhl		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 24460.46		2008	
Full Name (Last, First, Middle, Initial) of Payee NRA Institute for Legislative Action		Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 1817.16	
City State Zip Code Fairfax VA 22030		Transaction ID: 26942415	
Purpose of Expenditure Travel Expense		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 002		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12576333.55		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		3634.33	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee NRA Institute for Legislative Action		Date MM / DD / YYYY 10 / 27 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 200.34	
City State Zip Code Fairfax VA 22030		Transaction ID: 26942422	
Purpose of Expenditure Travel Expense		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 002		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 22619.82		2008	
Full Name (Last, First, Middle, Initial) of Payee NRA Institute for Legislative Action		Date MM / DD / YYYY 10 / 27 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 200.34	
City State Zip Code Fairfax VA 22030		Transaction ID: 26942424	
Purpose of Expenditure Travel Expense		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> Presidential	
Category/Type 002		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Timothy Walberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 54880.26		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		400.68	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee NRA Institute for Legislative Action		Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 33.65	
City State Zip Code Fairfax VA 22030		Transaction ID: 26942434	
Purpose of Expenditure Travel Expense		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 002		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
89515.27			
Full Name (Last, First, Middle, Initial) of Payee NRA Institute for Legislative Action		Date M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 8	
Mailing Address 11250 Waples Mill Road		Amount 2241.89	
City State Zip Code Fairfax VA 22030		Transaction ID: 27265845	
Purpose of Expenditure Travel Expense		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 002		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
12578575.44			
(a) SUBTOTAL of Itemized Independent Expenditures		2275.54	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee NRA Institute for Legislative Action		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 1494.58	
City State Zip Code Fairfax VA 22030		Transaction ID: 27265846	
Purpose of Expenditure Travel Expense		Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 002		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Phil English		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
91009.85			
Full Name (Last, First, Middle, Initial) of Payee NRA Institute for Legislative Action		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 1743.22	
City State Zip Code Fairfax VA 22030		Transaction ID: 27266334	
Purpose of Expenditure Travel Expense		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 002		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
12580318.66			
(a) SUBTOTAL of Itemized Independent Expenditures		3237.80	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee NRA Institute for Legislative Action		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 1162.14	
City State Zip Code Fairfax VA 22030		Transaction ID: 27266337	
Purpose of Expenditure Travel Expense		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 002		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
23781.96			
Full Name (Last, First, Middle, Initial) of Payee Suzanne Anglewicz		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 23.70	
City State Zip Code Fairfax VA 22030		Transaction ID: 27266331	
Purpose of Expenditure Travel Expense		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 002		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
12580342.36			
(a) SUBTOTAL of Itemized Independent Expenditures		1185.84	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Suzanne Anglewicz		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 15.80	
City State Zip Code Fairfax VA 22030		Transaction ID: 27266332	
Purpose of Expenditure Travel Expense		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 002		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 23797.76		2008	
Full Name (Last, First, Middle, Initial) of Payee Suzanne Anglewicz		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 46.35	
City State Zip Code Fairfax VA 22030		Transaction ID: 27266339	
Purpose of Expenditure Travel Expense		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 002		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12580388.71		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		62.15	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Suzanne Anglewicz		Date MM / DD / YYYY 11 / 24 / 2008	
Mailing Address 11250 Waples Mill Road		Amount 30.90	
City State Zip Code Fairfax VA 22030		Transaction ID: 27266340	
Purpose of Expenditure Travel Expense		Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 002		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Joe Knollenberg		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 23828.66		2008	
Full Name (Last, First, Middle, Initial) of Payee Tom Rickwalder		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 12277 Sherborne Street		Amount 1225.00	
City State Zip Code Bristow VA 20136		Transaction ID: 26813771	
Purpose of Expenditure Graphic Art Design		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 006		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 12581613.71		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		1255.90	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Rose Adkins Signature		Date MM / DD / YYYY 12 / 04 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund			FEC IDENTIFICATION NUMBER C C00053553		
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee Tom Rickwalder			Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8		
Mailing Address 12277 Sherbome Street			Amount 950.00		
City Bristow			Transaction ID: 26813772		
State VA			Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential		
Zip Code 20136					
Purpose of Expenditure Graphic Art Design			Category/ Type 006		
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 12582563.71			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008		

(a) SUBTOTAL of Itemized Independent Expenditures	950.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	3891453.07

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 8

Form/Schedule: **F3XN**
Transaction ID:

Year to Date totals on Schedule E are incorrect. Our software vendor's program adds the YTD totals for Memo Entry with the YTD total for the payment.